

NUCLEAR REGULATORY COMMISSION

ADVISORY COMMITTEE ON REACTOR SAFEGUARDS

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IN THE MATTER OF:

SUBCOMMITTEE MEETING

on

RELIABILITY AND PROBABILISTIC ASSESSMENT

Place - Washington, D. C.

Date - Wednesday, 5 December 1979

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PUBLIC NOTICE BY THE  
UNITED STATES NUCLEAR REGULATORY COMMISSION'S  
ADVISORY COMMITTEE ON REACTOR SAFEGUARDS

Wednesday, 5 December 1979

The contents of this stenographic transcript of the proceedings of the United States Nuclear Regulatory Commission's Advisory Committee on Reactor Safeguards (ACRS), as reported herein, is an uncorrected record of the discussions recorded at the meeting held on the above date.

No member of the ACRS Staff and no participant at this meeting accepts any responsibility for errors or inaccuracies of statement or data contained in this transcript.

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UNITED STATES OF AMERICA  
NUCLEAR REGULATORY COMMISSION  
ADVISORY COMMITTEE ON REACTOR SAFEGUARDS

SUBCOMMITTEE MEETING

on

RELIABILITY AND PROBABILISTIC ASSESSMENT

Room 1046  
1717 H Street, N.W.  
Washington, D. C.

Wednesday, 5 December 1979

The ACRS Subcommittee on Reliability and Probabilistic Assessment met, pursuant to notice, at 9:35 a.m., Dr. David Okrent, Chairman of the Subcommittee, presiding.

PRESENT:

- DR. DAVID OKRENT, Chairman of the Subcommittee
- MR. HAROLD ETHERINGTON, Member
- DR. J. CARSON MARK, Member
- MR. JEREMIAH J. RAY, Member

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## P R O C E E D I N G S

2 DR. OKRENT: Good morning. The meeting will now  
3 come to order. This is a meeting of the Advisory Committee  
4 on Reactor Safeguards Subcommittee on Reliability and  
5 Probabilistic Assessment. My name is David Okrent. I am  
6 the Subcommittee chairman. The other ACRS members present  
7 at this time are Mr. Carson Mark and Mr. Harold  
8 Etherington.

9 Also in attendance -- and Mr. Jerry Ray, Jeremiah  
10 Ray. Thank you.

11 Also in attendance are several ACRS consultants,  
12 Mr. Lave, Mr. Lowrance, Mr. Shinozuka. I think we will have  
13 one or more other ACRS members and consultants coming in  
14 later.

15 Also in attendance are two ACRS fellows,  
16 Mr. Michael Griesmeyer and David Johnson, at the table.

17 The purpose of this meeting is to discuss the use  
18 of risk assessment methods and the establishment of risk  
19 criteria by government agencies and other groups. We would  
20 also like to get suggestions on appropriate goals and  
21 criteria which might be used for nuclear power reactors.  
22 The meeting is being conducted in accordance with provisions  
23 of the Federal Advisory Committee Act and the Government in  
24 the Sunshine Act.

25 Mr. Gary Quittschreiber, on my right, is the

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kapHEE 1 designated federal employee for the meeting. The rules for  
2 participation in today's meeting have been announced as part  
3 of the notice of this meeting, previously published in the  
4 Federal Register, November 20, 1979.

5 A transcript of the meeting is being kept and will  
6 be made available as stated in the Federal Register notice.  
7 And it is requested that each speaker first identify himself  
8 and speak with sufficient clarity and volume so that he can  
9 be readily heard.

10 Those around the table have nametags, so the  
11 recorder will know who you are, but if others would please  
12 identify themselves in at least enough time so that the  
13 recorder knows, that will be helpful.

14 We have received no written statements or requests  
15 for time to make oral statements from members of the public;  
16 however, I plan to run this meeting a little more like a  
17 panel discussion with reasonable participation from the  
18 audience, so if a member of the audience would like to make  
19 a point, please get the attention of the subcommittee  
20 chairman.

21 We will now proceed with the meeting. Let me  
22 just, by way of brief introduction, for the benefit of those  
23 who may not be aware of it — although the subject of  
24 quantitative safety goals is not a new one in this society  
25 and it is not a new one in the question of nuclear reactors,

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kapHEE 1 it has not been one that has been addressed to the point  
2 that the Atomic Energy Commission before, or the Nuclear  
3 Regulatory Commission now, have identified quantitative risk  
4 acceptance criteria.

5 In May — more specifically, on May 16, 1979, the  
6 Advisory Committee on Reactor Safeguards wrote to the  
7 Nuclear Regulatory Commission, recommending that  
8 consideration be given by the Commission to the  
9 establishment of quantitative safety goals for overall  
10 safety of nuclear power reactors, and gave some reasons for  
11 why they thought this would be a useful thing to try to  
12 do. The next step chronologically was that one of the  
13 commissioners wrote to the ACRS asking for further comments  
14 in this regard.

15 And in August the ACRS said it would try to see if  
16 it could develop some possible proposed criteria that might  
17 be considered for use by the Nuclear Regulatory Commission,  
18 that could be published for comment, or this sort of thing.

19 I might note an additional item that has  
20 transpired in this regard — is that in NUREG-0585, which is  
21 entitled "TMI-2 Lessons Learned Task Force Final Report,"  
22 this task force made one recommendation, namely, Number 11,  
23 which is entitled "Safety Goals for Reactor Regulation," and  
24 in this they recommended that the Commission develop  
25 definitive policy guidance or articulation of a basic safety

kapHEE 1 goal for nuclear power plant regulation. They didn't  
2 specifically urge that this be strictly a quantitative goal,  
3 but they suggested that the goal would be supplemented,  
4 where possible, with quantitative risk criteria.

5 Then, more recently, on November 9, 1979, in a  
6 letter from the chairman of the Nuclear Regulatory  
7 Commission, Dr. Hendrie, to Dr. Frank Press, director of the  
8 Office of Science and Technology Policy, in which the  
9 Nuclear Regulatory Commission commented on the President's  
10 Commission report with regard to the accident at Three Mile  
11 Island. The Nuclear Regulatory Commission acknowledged the  
12 previous recommendations of the Advisory Committee on  
13 Reactor Safeguards, that the Lessons Learned Task force --  
14 and stated that a safety goal of nuclear power plant  
15 regulation in terms of clear subjective criteria is needed  
16 and should be supplemented, where possible, by quantified  
17 reliability criteria.

18 So, in any event, there is a small recent history  
19 of this topic within the last several months, and what the  
20 ACRS has tried to do in the last few months is to see  
21 whether, via this subcommittee, one could develop both  
22 background information and possibly one or more alternative  
23 proposals for risk acceptance criteria, quantitative if  
24 possible.

25 But we shall see. In any event, the purpose,

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kapHEE 1 then, of this meeting, was to try to learn a little bit  
2 about what was being done in this regard in some of the  
3 other government agencies, and also to see what suggestions  
4 one might get for goals in quantitative risk criteria that  
5 might be used for nuclear power reactors.

6 So that is by way of brief introduction. And  
7 since I am a minute ahead of the agenda, I will try to  
8 continue that way, since it is probably the last time today  
9 that will be the case.

10 Our first speaker is Dr. Vincent Covello of the  
11 National Science Foundation, who I believe will discuss some  
12 NSF sponsored programs on risk assessment. I might note  
13 there are a few copies of the agenda on the table over  
14 there if anybody doesn't have that and would like to have  
15 one. So, Dr. Covello.

16 (Pause.)

17 DR. COVELLO: My name is Vincent Covello. I am  
18 the Program Manager for the Risk Analysis Program at the  
19 National Science Foundation. I have been asked today to  
20 describe very briefly to you the program in risk analysis at  
21 the Foundation, as well as to answer any questions that you  
22 might have about that program.

23 First of all, the program is very new. It is  
24 approximately five months old. It is located in the  
25 Division of Policy, Research and Analysis in the

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kapHEE 1 Foundation. It is also part of the Technology Assessment  
2 and Risk Analysis Program as a whole. It is a subcomponent  
3 of that particular program.

4 Because it is located within the Division of  
5 Policy, Research and Analysis, all studies that are  
6 sponsored through this program have a policy focus, and I  
7 will come back to that later.

8 The program was created in response to several  
9 requests, specifically one from the House Committee on  
10 Science and Technology, which asked the Foundation  
11 specifically to develop a long-term program of research that  
12 looks at methods of risk assessment. We have been asked to  
13 sponsor research that would develop improved methods for  
14 risk analysis and risk assessment. We also received several  
15 requests from agencies including the Nuclear Regulatory  
16 Commission to also look at questions such as risk  
17 acceptability and general questions relating to issues and  
18 risks.

19 In response to these various requests the  
20 Foundation, approximately seven months ago, created this  
21 particular program. It was formally announced five months  
22 ago, in August. We are engaged in two activities, in  
23 response to the request.

24 First we are engaged in planning activities. The  
25 planning activities are threefold. First, we have asked the

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kapHEE 1 National Academy of Sciences to assist us in planning a  
2 full-scale program in risk analysis. We hope that as a  
3 result of the Academy's work they will produce an agenda of  
4 research that we can use as part of our own planning for  
5 risk assessment. We expect that a program announcement will  
6 probably be announced and available to the public this  
7 coming summer.

8 Second, we have commissioned several papers on  
9 risk assessment on the state of the art, surveying where we  
10 are with regard to risk assessment and where we should be  
11 going.

12 And third, we have also established a liaison  
13 activity with various agencies, trying to assess their own  
14 needs and what types of activities at the Foundation would  
15 support their particular programs.

16 In addition to the planning activities for the  
17 full-scale program once it is in place, we are also  
18 currently engaged in encouraging the submission of  
19 unsolicited proposals dealing with a wide range of questions  
20 related to risk assessment.

21 What we have done recently, if everyone has the  
22 handout, we have sent out a letter to the research  
23 community, to approximately 4000 people, announcing the  
24 creation of the risk assessment program, and specifying the  
25 types of questions that we are interested in and the type of

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kapHEE 1 proposals we would be interested in supporting. I think you  
2 will see in the questions listed there they cover a wide  
3 range of activities including how to determine how safe is  
4 safe enough, a question dealing with the perception of risk,  
5 risk acceptability, institutional/organizational constraints  
6 on risk decision-making -- these are the types of questions  
7 we are addressing. And they specify a very broad range of  
8 activities and we expect, at a later date, to be more  
9 specific in the types of proposals we are interested in.

10 At the present stage, though, since we are  
11 primarily interested in obtaining some of the best  
12 information and knowledge as to the state of the art, these  
13 are the broad outlines of the program.

14 The program has several constraints on it,  
15 though. In addition to proposals that deal with those  
16 questions, we are also asking, first of all, that the  
17 proposals submitted to the Foundation deal with risk on a  
18 generic level as opposed to dealing with specific  
19 applications. As I mentioned before, our task is to develop  
20 improved methods of risk assessment.

21 As a result, if specific applications -- for  
22 example, to nuclear power or to other energy systems -- are  
23 suggested, we ask that those particular studies be  
24 considered as case studies addressing a more general, broad  
25 issue in assessment.

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1           The second constraint on the program is that all  
2 proposals have to have a policy focus. In other words, all  
3 the proposals and research responses should somehow or  
4 another address the questions that are being asked by  
5 decision-makers, and they should be addressing issues  
6 currently on the agenda, or expected to be on the agenda for  
7 risk analysis in the coming years.

8           The third constraint on the program is: we  
9 primarily deal with technological risk and not with natural  
10 hazards or with entrepreneurial risk. Technological risks  
11 such as energy, toxic substances, the whole range of risk  
12 that relate to science and technology — we cannot deal,  
13 given our mandate, with risks that don't fall within that  
14 category.

15           At the present stage, because we are involved in  
16 our planning activities, the type of research we are  
17 supporting range from between projects of \$150,000 to  
18 \$200,000, and a year to a year-and-a-half worth of effort.  
19 We have received as a result of the addendum to our program  
20 announcement approximately 150 letters of inquiry and  
21 preliminary proposals. We are also now already reviewing  
22 several proposals that have come out as a result of that  
23 letter.

24           We have also supported several studies that are  
25 ongoing. These particular projects were not supported

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kapHEE 1 directly under the risk analysis program. They were taken  
2 into the program after the creation of the program. The two  
3 are as follows: the one project, by Robert Cates and Roger  
4 Casperson at Clark University. The title of their proposal  
5 is "Methods for Improving Public Policy for Technological  
6 Hazard Management." The focus of that particular study is  
7 to develop a taxonomy of risk and to use that taxonomy of  
8 risk in developing approved methods of technological hazard  
9 management.

10 The second major project we're supporting in  
11 present times is one by David Okrent, the chairman of the  
12 subcommittee at the meeting. The title of that project is  
13 "Alternative Risk Management Policies for State and Local  
14 Governments." The focus there is looking at types of risk  
15 that have to be dealt with at the local level and developing  
16 improved methods for management of those types of risks.

17 On both of those projects, there is a subcontract  
18 in Eugene, Oregon, which is looking at perception of risk  
19 and feeding that material into the main projects.

20 At the present time, the program has a budget of  
21 approximately \$1.5 million. We expect within the next five  
22 years to increase the size of that budget to something  
23 larger than that, although it hasn't been exactly determined  
24 how large that budget will be. It will primarily depend  
25 upon the response of the research community to the types of

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kapHEE 1 questions we've asked. And as a result of that response we  
2 will determine how large the budget will be.

3 That is the general outlines of the program. I  
4 think it's probably easier for me to address questions than  
5 to go into too much detail about any of these particular  
6 studies we are addressing.

7 MR. LOWRANCE: Bill Lowrance, consultant. I have  
8 been concerned for a long time with how the NSF works with  
9 the other mission agencies in supporting research of this  
10 sort. I think this is a good example, where NSF could do  
11 generic research that could serve the needs of anybody from  
12 the FDA to EPA to NRC. And I wonder, mechanically, how you  
13 interact and whether you are soliciting those mission  
14 agencies for ideas, either research needs or people who  
15 might be interested.

16 DR. COVELLO: Well, first of all, one of the  
17 activities we engage in is direct liaison with the mission  
18 agencies. For example, the creation of the National Academy  
19 of Sciences Committee on Risk and Decision-Making was  
20 partially in response to a request from the Nuclear  
21 Regulatory Commission, from the office of Saul Bean, to look  
22 at questions of acceptability of risk. We discussed with  
23 the NRC the various needs, concerns, and used that as the  
24 basis for our own putting together of the Academy  
25 committee.

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In addition we have liaison activities with each major agency that has risk assessment responsibilities. We share with them proposals for both review of our proposals to them -- we also review proposals on their side and that way we maintain a liaison of knowing what the other groups are doing and what their programs are.

A third things we are doing -- and this is much more specific -- is that we have asked the Academy to meet periodically with an advisory group we are at the present time establishing, of government regulatory agencies dealing with the question of risk. This will be approximately 14 individuals representing each of the mission agencies that has risk assessment responsibilities.

And we will have this advisory committee of government agencies meet with the Academy committee to indicate to them what the needs are of the particular agencies, and what types of questions they would like to see addressed from their perspective.

We hope through this interaction between the Academy and the advisory committee that the Academy will be more responsive to the needs of the mission agencies. We also hope to use that advisory committee as an information resource for our own program on the needs of the particular agencies.

DR. MARK: You use the word "technology" and

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kapHEE 1 distinguish between what we mean by "technology", for instance. How  
2 broad an area is covered by technology? Is it all  
3 industrial? Or scientific activity that affects the  
4 population?

5 DR. COVELLO: The actual outlines of it are still  
6 not clear. As you know, the definition of "technology"  
7 varies from person to person and place to place.

8 DR. MARK: I mean, the release of carbon dioxide  
9 by burning wood in Vermont isn't very technological.

10 DR. COVELLO: Right. But what we are looking for  
11 in the proposals is connection to science and technology in  
12 some direct, as opposed to an indirect or implicit way. So  
13 carbon dioxide would not be, but if we looked at the  
14 technologies that produce carbon dioxide or carbon monoxide,  
15 or other sort of types of toxic substances, we are looking  
16 at the actual production of technology that produces it, as  
17 opposed to the product of that technology.

18 There is the focus. It has to be tied back to the  
19 particular technology itself, as opposed to the product of  
20 that technology.

21 DR. MARK: It seems to me that there is something  
22 perhaps not caught up here that policy as well as technology  
23 may result in carbon dioxide. And is that within the scope  
24 of the matters of concern?

25 DR. COVELLO: I'm not sure I understand.

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2 DR. MARK: Well, I referred to the burning of wood  
3 in Vermont. People are saving enormous amounts on their gas  
4 bills by doing that, and if everybody in the country should  
5 do that, this is not so much a matter of technology as a  
6 matter of policy. And is that going to be caught up by your  
7 net?

8 DR. COVELLO: I will probably have to leave that  
9 as a open issue, because we have not yet tried to strictly  
10 define the boundaries of what would be considered within the  
11 program, to find out what is technology and what is not. We  
12 are hoping as a result of our own internal planning  
13 activities and review to come to a more specific definition  
14 of what science and technology related risks are, and to use  
15 that as a boundary condition for the program.

16 Again, it is such an open area and subject to such  
17 controversy about what would be considered a technology and  
18 what is not a technology -- there is no specification on  
19 what would be determining that, how that would be  
20 determined.

21 DR. OKRENT: Is there some reason why this is a  
22 new program in NSF? The question of risk and society and  
23 what constitutes acceptable risk, it seems to me, has been  
24 staring us in the face for some time. I would have expected  
25 NSF would have been ahead of the Congress, instead of behind  
it, in this regard.

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1 DR. COVELLO: Well, the NAE study was sponsored by  
2 the National Science Foundation for technology assesment and  
3 the RANN program, the one on risk benefit, is that the one  
4 you are referring to?

5 DR. OKRENT: In 1972, but there has been no  
6 program.

7 DR. COVELLO: No, there has not been a specific  
8 program in risk analysis or risk assessment at the  
9 Foundation. Most of the activities have dealt with specific  
10 technologies. There has been a program in chemical threats  
11 to the environment. There is a program on earthquake hazard  
12 mitigation. There are programs that deal with different  
13 types of science and technology and risks associated with  
14 them.

15 There hasn't been a program at the Foundation  
16 which has focused on risk assessment per se. Questions  
17 related to risk have been dealt with as part of those other  
18 programs. What I believe has happened now is that as a  
19 result of both the Congress and internal planning as well is  
20 that it is decided that the Foundation should have a more  
21 visible and centralized location for risk analysis studies.  
22 And the importance of the question, the generic issues, that  
23 crosscut various types of agencies and various problems are  
24 being recognized -- and it is seen as beneficial to have a  
25 centralized location for risk analysis programs that will

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kapHEE 1 coordinate with each of the separate programs within the  
2 Foundation.

3 DR. OKRENT: Because, in fact, there was no home  
4 within NSF that one could find for such a proposal a year or  
5 year-and-a-half ago -- I know from my own experience.  
6 Dr. Shinozuka.

7 DR. SHINOZUKA: You specifically mentioned that  
8 your program excludes consideration for a natural hazard.

9 DR. COVELLO: Right.

10 DR. SHINOZUKA: It seems to me that a natural  
11 hazard obviously is an important component when we assess,  
12 say, safety of structures -- how we design structures  
13 against such natural hazards -- result in different levels  
14 of risk. I would like to know why, then, you do not  
15 entertain the proposal that might involve natural hazard  
16 consideration.

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1 DR. COVELLO: At the present time most of the  
2 proposals dealing with natural hazards are dealt with by a  
3 program is the Foundation's earthquake hazards mitigation  
4 program, which primarily deals with earthquakes and natural  
5 hazards as well, including generic questions relating to  
6 natural hazards. It is possible that at some later date we  
7 will coordinate closely with that program. One of the  
8 activities relating to the planning activities of the  
9 Foundation is to determine whether or not those activities  
10 should be joined together. At the present time there is a  
11 functioning program dealing with natural hazards in the  
12 foundation, and it wasn't seen to be --

13 DR. SHINOZUKA: I am aware of that program that  
14 deals with earthquake hazard mitigation in the National  
15 Science Foundation, but I am not quite sure if they really  
16 focus on, let's say, the policymaking based upon risk  
17 analysis. That is my primary concern.

18 DR. COVELLO: There is one -- I brought along the  
19 program announcement for that particular -- the earthquake  
20 hazard mitigation program, and they do have a policy  
21 research section. And I will read from it:

22 "Policy research: This particular element of the  
23 program strengthens and facilitates the adoption and  
24 implementation of technological, social, and management  
25 practices that minimize earthquake damage and facilitate

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pv HEE 1 rapid recovery from earthquake disasters."

2 They have, in other words, within their mandate to  
3 deal with policy questions relating to natural hazards.

4 DR. OKRENT: Well, thank you, Dr. Covello.

5 The next speaker is Dr. J. L. Von Thun.

6 MR. VON THUN: It is Larry Von Thun, and there is  
7 no doctor.

8 DR. OKRENT: He is from the Bureau of Reclamation,  
9 and he's going to give us two presentations. The first  
10 discusses the mission progress of the seismic risk analysis  
11 interagency committee on seismic safety. And then he will  
12 discuss the Jackson Lake risk analysis. And if we are  
13 fortunate, he may also provide some suggestions on what we  
14 should do for nuclear power.

15 MR. VON THUN: I am with the Bureau of  
16 Reclamation. I don't know how many of you know what the  
17 Bureau of Reclamation is.

18 DR. OKRENT: Why don't you tell us in 30 seconds.

19 MR. VON THUN: They just changed their name. I  
20 will have to tell you that, as well. The Bureau of  
21 Reclamation is a water resources agency dealing with the 17  
22 western states. Most of the large dams in the western  
23 U.S. were built by the Bureau of Reclamation between 1902  
24 and the present: Glen Canyon, Hoover, Shasta, most of those  
25 dams. As such, as an agency which is producing a product,

pv HEE 1 we are more on the firing line in front of, say, states,  
2 even other federal agencies, with regard to risk assessment,  
3 people asking us, "What are you doing about risk  
4 assessment," rather than, say, being devoted to research.

5 So, what I will be discussing today is how we are  
6 trying to apply our risk assessment methods with the  
7 information that we currently have.

8 DR. MARK: Could I ask. You said you have 17  
9 western states?

10 MR. VON THUN: Yes.

11 DR. MARK: And the other states, you are not  
12 active; but there, the Corps of Engineers might be doing  
13 some things?

14 MR. VON THUN: That's right. The Corps of  
15 Engineers is really applicable to the entire U.S. The  
16 Bureau of Reclamation, beginning with the Reclamation Act of  
17 1902, only dealt with reclaiming or providing water,  
18 essentially, for the arid west. That is the  
19 differentiation. Whereas the Corps of Engineers works with  
20 navigation, and that can be within any of the U.S.

21 The first presentation is with regards to a  
22 committee on seismic safety in federal construction. After  
23 the San Fernando earthquake in 1971, a lot more attention  
24 began being paid to the seismic safety of structures, both  
25 dams, buildings, even nuclear power plants, although that

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1 was well along the way as far as seismic risk assessment.  
2 And with the failure of a number of dams throughout the  
3 U.S. and generally more and more attention being paid to  
4 seismic safety, the President asked the Office of Science  
5 and Technology Policy -- I believe that was where it was  
6 initiated -- to form an interagency committee of all federal  
7 agencies concerned with building structures to come together  
8 and decide how the seismic safety could be improved.

9           And that committee has a number of subcommittees.  
10 They have committees on seismology, on site hazards, on  
11 critical facilities. And one of their committees is on risk  
12 analysis. And the question to this subcommittee is: how  
13 should federal agencies be using risk analysis?

14           My personal background with regard to how I got on  
15 this subcommittee stems largely from two events. One is the  
16 Auburn Dam in California -- which is not a dam as yet, it is  
17 just a proposed dam. It has been the subject of a great  
18 amount of public interest with regard to seismic safety.  
19 California has a Seismic Safety Commission which asked these  
20 questions of the Bureau and of any other agency which is  
21 planning on building a structure as to: can you verify its  
22 seismic safety? And this gets into the question of what is  
23 the true risk involved?

24           Carl Steinburge, who is the chairman of that  
25 Commission, asked me the question before a meeting similar

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1 to this with regard to acceptable risk to actually come up  
2 with a better definition for "acceptable risk," because, as  
3 he felt, "acceptable risk" is neither acceptable now nor  
4 accepted by anyone, it is just a term we all use. And in  
5 grilling before the Seismic Safety Commission, the Bureau  
6 began to think a lot about what and how to apply risk  
7 assessment in that work.

8 Then, following the Teton Dam failure, we were  
9 reviewed by numerous agencies, and, without exception, the  
10 advisement was given to develop risk assessments in our  
11 work, both with existing dams and with ongoing dams. So,  
12 some of the work that we have done has been in that regard  
13 in trying to work with what is the seismic safety of our  
14 existing dams and how do we determine what the probability  
15 of risk of their failure is.

16 And it was through those types of efforts that I  
17 was involved in this committee or asked to be a part of this  
18 committee.

19 As far as the accomplishments of our Subcommittee  
20 on risk analysis, there have not been a great deal to  
21 date. I have provided you a three-page handout here which  
22 should not be considered the output of the committee, but  
23 rather my own personal input to the committee, because there  
24 have not been any decisions reached by the committee as yet  
25 as to how they are going to approach the problem of

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1 recommendations to other federal agencies on the use of risk  
2 assessment. But there are a few things which fit right into  
3 what you are asking for as far as the purpose of this  
4 committee: what is being done and what might be done.

5           The first thing that I would discuss in this  
6 regard is a general framework for risk assessment. We have  
7 three elements, as I see it, three elements with regard to  
8 seismic safety: one is what is the probability of  
9 occurrence of seismic events; the second is what is the  
10 probability of failure of a facility given the seismic event  
11 occurs; and the third is the estimation of the consequences  
12 of failure of the facility.

13           In reading the literature, the terms "risk,  
14 hazard, hazard potential, and exposure" are used  
15 interchangeably; there is no consistency. And the first  
16 thing I was recommending to this committee is that we  
17 develop a framework where we consistently refer to these  
18 different terms with regard to their application in decision  
19 analysis by risk-based methods.

20           In this vein, then, I suggested the term  
21 "exposure" is used in reference to the action or influence  
22 to which a facility is subjected. In other words, what is  
23 the exposure of a particular facility to an earthquake  
24 either shaking or faulting.

25           The second term, "hazard," I suggest that that be

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pv HEE 1 used in reference to the damage potential. In other words,  
2 when we create a dam, a nuclear power plant, or a building,  
3 we have created a potential hazard that can fail and cause  
4 some damage. Without the facility there, the hazard doesn't  
5 exist.

6 The third term, "risk," has been used in all of  
7 the elements we talked about. The risk of the earthquake,  
8 we talked about the risk of failure of the facility, and we  
9 talked about the risk of loss of life to individuals. I  
10 would suggest that, rather than use it in all those veins,  
11 that we use the term "risk" to refer only to the probability  
12 of failure occurring as the result of some exposure to some  
13 action such as an earthquake and resulting in some damage.

14 The total framework which we deal with I called  
15 "risk-based decision analysis." With all the work that we  
16 do at the Bureau, that is the way we refer to it. So, this  
17 is the framework that I would suggest using.

18 As far as residual risk goes, the definition is  
19 supplied in your handout, and this is how I would look at  
20 residual risk and think that it should be advanced to the  
21 public and within all the different agencies.

22 "Residual risk" is the probability of occurrence  
23 of a facility failure, the chance that a facility will fail,  
24 and that loss of life or economic loss which remains in  
25 existence. Some probability of that remains in existence.

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1                   After the loading conditions, the earthquake  
2 loading conditions or whatever loading conditions you have,  
3 after those conditions have been specified, appropriate  
4 designs to take care of those conditions have been prepared  
5 and additional safety precautions are established, what is  
6 left after you do all of those things — after you have  
7 assigned the facility, after you have specified what the  
8 earthquake is for design or the other loading provisions for  
9 design, after you have designed the facility to take that  
10 loading and after you have established safety precautions —  
11 that is "residual risk."

12                   And when somebody accepts that, when the owner of  
13 a facility or the U.S. Government or somebody says, "Okay,  
14 there is still this much chance that there could be a foulup  
15 or a problem," that becomes "accepted risk." And to date,  
16 that has not occurred, and that is really what I see you are  
17 talking about doing through this committee, is defining some  
18 number that becomes the "accepted risk."

19                   We have talked about "acceptable risk," but I  
20 think in very few cases, if any, has an agency or an owner  
21 decided this is how much risk that I am willing to take.

22                   With regard to what recommendations our  
23 subcommittee might make, the next two pages provide my sort  
24 of device or input to our subcommittee with regard to  
25 recommendations. If you look at the middle of the second

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pv HEE 1 page of the handout, it says: "The question then is:  
2 considering the current level of knowledge, experience, and  
3 practice in risk analysis, what are the possible types of  
4 requirements of federal designers and regulators that could  
5 achieve the above results" -- meaning lowering the chance of  
6 seismic hazards.

7           These requirements and regulations would occur in  
8 three different areas: One, the determination of seismic  
9 loading. Under the determination of seismic loading, then,  
10 there are three possible requirements that I have  
11 suggested.

12           One is to specify the technique to determine the  
13 level of loading to be used; the second is to establish a  
14 requirement that to determine the risk level of loading  
15 selected and compare it to other risks -- in other words, a  
16 person designing a building or person designing a dam or a  
17 nuclear reactor or whatever would be required under our  
18 suggestions to determine what is the level, what is the risk  
19 of that particular level of loading. Then item 3 would be  
20 just as -- or item C would be just as item B except we would  
21 specify what the methodology is that would require -- that  
22 would allow that determination of risk.

23           If we got to the point of saying a risk level of  
24 loading at, say,  $1 \times 10$  to the 4th was an acceptable or was  
25 the acceptable risk of loading, loading only, then one

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pv HEE 1 approach would be to say, to actually calculate the loading,  
2 given that an earthquake has an occurrence interval of a  
3 certain amount, that has a probability of not being ceded in  
4 so many years and that would specify that would meet that  
5 particular requirement of loading.

6 As of right now, my recommendation would be that  
7 all we can require of federal agencies at this date is to  
8 ask that in each analysis the risk level of loading be  
9 selected, be determined, and that it be compared to the  
10 risks of other loadings so that we can get a handle on what  
11 is the likelihood of all of the loadings and people actually  
12 go through the process of seeing what the risk is. We are  
13 not at a stage — I don't feel we are at a stage where we  
14 can tell people building buildings or building dams that  
15 this is the level of earthquake loading that should be used  
16 and have that applied across the board.

17 Okay, the second area where we would require some  
18 regulation is in determining the merit of design provisions  
19 in the reduction of risk. This is to do with the question:  
20 if we add such and such, a reinforcement, to our design, or  
21 we add some additional safety precaution to our design, how  
22 does that in fact lower the risk of failure?

23 And the requirements that we could impose there  
24 are: specify that the alternative designs to reflect the  
25 different degrees of resistance to seismic loads be

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pv HEE 1 identified; require that the reduction in risk as a result  
2 of various design measures be estimated along with the cost  
3 of the measure; and require an estimate in terms of the  
4 savings in potential damages be computed thus allowing a  
5 cost-benefit relation to be drawn.

6 This alternative A here is really nothing more  
7 than what was suggested by Professor Whitman back in about  
8 1971. He made a classical study of earthquake hazards in  
9 Boston and went through an analysis showing a cost-benefit  
10 for designing the buildings to various earthquake levels.  
11 Right now I don't see that we are much farther along than  
12 that.

13 And a possible requirement is that we just ask  
14 people designing buildings or any other structures to go  
15 through this process of looking to see what would we do to  
16 lower the risk of failure of this structure if we added this  
17 much reinforcement or if we made this particular change,  
18 look at the alternatives, and see what the benefits are.

19 In effect, this is very similar to the passage of  
20 the NEPA Act. There was no requirement other than -- or the  
21 basic requirement was that people look at the alternatives.  
22 And this is what we're talking about here: look at what the  
23 alternatives are, see and calculate what the reduction of  
24 risk is.

25 A second possibility is that we would specify that

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1 the risk that is computed be no greater than a certain  
2 amount. And the third one -- which is in error here -- is  
3 that require that that requirement be determined by a  
4 specific methodology; in other words, we would say that the  
5 risk of failure of a facility can be no greater than a  
6 certain amount and we will tell you how you're going to  
7 calculate that certain amount.

8 Those would be the possible recommendations with  
9 regard to determining the benefit of alternative designs.

10 And the third item there is with regard to the  
11 final product of determining what the risk of a loss of life  
12 or economic loss is once the structure is in place and,  
13 given that the event takes place, we could require that the  
14 residual risk of various potential damage levels be  
15 determined for certain structures. And then the second part  
16 of that is that we would specify how much that residual risk  
17 would be.

18 And as I say, these are not adopted by the  
19 committee. In fact, these have only been sent to them. But  
20 the timing of the meetings was such that they were going to  
21 meet yesterday and they didn't meet. They will be meeting  
22 next week. In fact, we have one member here from that  
23 subcommittee.

24 These are just suggestions to give you some idea  
25 of what is being thought about with regard to imposing some

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pv HEE

1 sort of requirements or regulations or at least suggesting  
2 these for use by other federal agencies.

3 There is a member of the Nuclear Regulatory  
4 Commission on this subcommittee, by the way.

5 So, I am open to questions on what our  
6 subcommittee is doing.

7 DR. OKRENT: Dr. Lowrance.

8 DR. LOWRANCE: Bill Lowrance, from the seismically  
9 active area of Palo Alto, California.

10 How would item 2-B be pursued? This says "specify  
11 that the risk of failure given various seismic loadings  
12 associated with the structure be determined and that it be  
13 no greater than a given amount; that is, a risk ceiling be  
14 prescribed." Where do you suggest that come from?

15 MR. VON THUN: That's why I am saying that is  
16 somewhere maybe in the future. Right now we are not to the  
17 point that that can be done. When the committee was  
18 formulated, that was one of the things that was sort of  
19 thought about, that this might occur. In fact, in the  
20 directive we will get a little more to where that can come  
21 from later.

22 But basically, the only place that I see that it  
23 can come from is for people to begin applying the rules or  
24 begin applying the risk assessments, see what types of norms  
25 or standards can be developed with regard to what is a good

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pv HEE 1 value to use as a risk level. If we don't make the studies  
2 of actual applications, we won't have an idea whether  $1 \times 10$   
3 to the 6th or  $1 \times 10$  to the 8th or to the -8th is a valid  
4 number. So right now the number isn't available.

5 DR. OKRENT: Dr. Lave.

6 DR. LAVE: What is the uncertainty level  
7 associated with either estimating the seismic risks or with  
8 estimating the probability of the failure of a structure in  
9 relation to a particular type of risk?

10 MR. VON THUN: It is very great. I would say that  
11 the first one is quite a bit less. What the loading is is  
12 less than that can be estimated better than can what the  
13 probability of a failure is given that loading occurs.

14 The reason for that is we have had as few  
15 earthquakes as we have had. We have had a lot more  
16 earthquakes than we have had failures due to earthquakes, so  
17 we don't have a very good statistical base on which to  
18 decide how a dam or a structure is going to react to the  
19 earthquake. Buildings may be a little different than dams,  
20 but we don't have -- we have, for instance, in the United  
21 States only a couple of embankment dams that have suffered  
22 damage due to earthquakes among the thousands and thousands  
23 of embankment dams that we have.

24 DR. LAVE: Let me pursue this a little bit more.  
25 How is the probability of a seismic event estimated? Is it

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pv HEE 1 simply historical frequency?

2 MR. VON THUN: No. The probability of a seismic  
3 event has undergone -- the estimation has undergone a great  
4 deal of work, and it is continuing to undergo a great deal  
5 of work.

6 But is based upon what is the geologic capability  
7 of a particular area, and that is referred to as the  
8 "maximum credible earthquake," or in the nuclear reactor  
9 field as the "safe shutdown earthquake." This is the  
10 largest earthquake that can be postulated to occur for a  
11 particular seismic region. There we're talking about the  
12 probability of an event that could vary from once in 100,000  
13 years or once in 500,000 years down to where it could occur  
14 once every three or four hundred years. For smaller-sized  
15 earthquakes usually the historic frequency is the method  
16 that is used.

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1 DR. LAVE: What steps have been taken or can be  
2 taken to try and quantify the level of uncertainty that is  
3 associated with each of the two events, either the seismic  
4 loading or the structure failure in case of a particular  
5 seismic loading?

6 MR. VON THUN: There have been a few studies.  
7 There was recently a conference in Pasadena on earthquake  
8 engineering, and at that conference there were some  
9 suggestions made by Woodward, Clyde & Associates of how to  
10 provide some constraints on the uncertainty. If one allows  
11 the uncertainty to go unchecked, then at very low risk  
12 levels it becomes a tremendously predominant factor.

13 So they were suggesting that certain modifications  
14 be applied to that uncertainty function as it approached the  
15 low risk levels. So other than a few attempts to look at  
16 this uncertainty question, there hasn't been a lot done.

17 DR. LAVE: Has there been any attempt at all to  
18 take a look at the uncertainty level with respect to the  
19 mean probability or the most frequent probability?

20 MR. VON THUN: Yes, there is.

21 DR. LAVE: And what kind of sub-numbers do you  
22 come out with?

23 MR. VON THUN: I don't have them offhand. Do you  
24 mean as far as, say, the mean level of acceleration is such  
25 and such, and what is the bounds on that?

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DR. LAVE: No. I was thinking about -- you have here probabilities of seismic events of, for example, .003, and obviously there's a large uncertainty associated with that. Is the uncertainty equal to the mean or ten times the mean or a thousand times the mean?

MR. VON THUN: I think one of the best examples of what that uncertainty is is in a paper that Dr. Okrent had a lot to do with where the experts in seismology were asked for a number of different nuclear reactors, nuclear reactor sites, as to what the low level risk would be for this maximum credible earthquake. Each of these investigators postulated from available information what the risk of a certain intensity earthquake was, and that gives an idea of what the range is. And it was quite a range.

As far as a detailed assessment and application of uncertainty, I am certainly aware of it, but I don't think it has been done. I am aware of its need to be done, but it really has not been done to the degree which you are asking the question about.

DR. LAVE: Just one final one here. What could be done to lower uncertainty levels?

MR. VON THUN: Well, with regard to the seismic event, there isn't really anything that can be done except do a good job of analysis of your site. We don't have any other information than the geologic record which we might be

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1 lucky and excavate through a fault and find that it has had  
2 so many displacements in so many thousand years and be able  
3 to estimate what the earthquake is on the basis of those  
4 displacements.

5 At the Auburn site in California, we went through  
6 a tremendous study and really came up empty-handed as far as  
7 being able to definitively say what the recurrence interval  
8 of earthquakes in that area was. So it isn't a foolproof  
9 thing, but it is something that should be done.

10 We don't have any more historic records than we  
11 have, so we can't do any better on that. But my feeling is  
12 that the uncertainty in that is not so great.

13 With regard to performance under seismic loading,  
14 we can make additional tests. We can do better studies. We  
15 can develop dynamic analyses methods to try and predict the  
16 response, but without prototype failures we really will  
17 always have a certain amount of uncertainty. The approach  
18 that we're taking at the Bureau is to try to make that  
19 calculation on as many structures as possible in order to  
20 assess the relative risks of these failures, and in that  
21 way, get rid of the uncertainty.

22 If nobody makes any analyses, if we always keep it  
23 in the research mode, then we really will always have that  
24 uncertainty sitting there as far as the actual structures.  
25 I think once we start the studies on actual structures, we

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mgcHEE 1 will reduce some of the uncertainty.

2 DR. OKRENT: Dr. Wilson?

3 DR. WILSON: I was just wondering -- I'm talking  
4 about the uncertainties -- one thing that worries me is one  
5 tends to talk about the expected value of an earthquake or a  
6 hazard and the uncertainty around that, whereas quite often  
7 that is not what the decision-maker needs to know. He wants  
8 to know the probability of exceeding a certain bound, and  
9 hopefully he is going to set that bound so the probability  
10 is very low. And since the distribution in which the  
11 uncertainty is described and the width of that distribution  
12 is certainly not very simple, are you addressing that  
13 specifically when you are discussing the uncertainty?

14 MR. VON THUN: Yes. Generally what is done is an  
15 upper bound is taken, rather than the mean value, either in  
16 all the steps or certain of the steps to assess the  
17 loading. We don't take the upper bound at the first stage,  
18 the upper bound at the second stage, and the upper bound at  
19 the third stage. We may take the upper bound in certain  
20 regards, but that problem is being addressed. We do not  
21 typically take the expected value in each case, and we look  
22 at a number of possibilities.

23 In a later study, here you will see how that is  
24 done.

25 DR. OKRENT: Dr. Castenberg?

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1 DR. CASTENBERG: Bill Castenberg from the ACRS.  
2 I'm curious about your definition of "hazard" and "risk."  
3 If I understand correctly, risk is probability, and so you  
4 could have a dam near a large city and a dam out in the  
5 country that had the same risk where the probability failure  
6 is the same, but they might have different hazards because  
7 of population. And if I understand that correctly, most of  
8 your work is geared toward risk reduction rather than hazard  
9 reduction. Is that correct?

10 MR. VON THUN: Well, the work is with regard to  
11 risk-based decision analysis. Now we're not to the point  
12 where those types of decisions really have been made on the  
13 basis of risk analysis. But I think fundamentally the  
14 question is right. We would look at what the risk is at  
15 this site versus the risk at another site, and that is what  
16 we want to deduce.

17 DR. CASTENBERG: Do you mean, in the sense of this  
18 definition, really probability?

19 MR. VON THUN: Yes.

20 DR. CASTENBERG: Or do you mean risk in a more  
21 general sense where you include hazard as well as  
22 probability?

23 MR. VON THUN: Hazard is always included. When  
24 you talk about the resulting certain level of damage, that  
25 would always be included, so that the risk of, say, 40

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HEE 1 lives would be the same, no matter where you were working,  
2 but the damage level, the risk of a certain damage level  
3 occurring, that is what we're talking about.

4 DR. OKRENT: Could I ask the following question?  
5 Auburn dam which you mentioned was estimated by  
6 Mr. Seidegren to have the potential for causing up to three  
7 quarters of a million fatalities were it to fail suddenly,  
8 which is indeed a large number. Is there, in your way of  
9 thinking in regard to the evaluation of accepted risk or  
10 acceptable risk or whatever way we do it, is there some  
11 limitation that enters from the magnitude of the event,  
12 independent of the probability, or should we always factor  
13 in a probability times the maximum hazard and look only at  
14 the product? Or how do you propose one deals with this  
15 question?

16 MR. VON THUN: My proposal -- the way I would look  
17 at that is, each case has got to be considered differently  
18 with regard to what are the defined levels of damage in the  
19 case of any dam, and Auburn is a good example. You would  
20 look at what is the probability of damage level of \$2  
21 billion for property damage, say, wiping out Sacramento,  
22 doing damage to Sacramento, and the probability of so many  
23 lives lost. And when one deals with that number, that  
24 residual risk that was associated with that loss, he would  
25 refer to that specific loss, so that it wouldn't be lost in



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1 front of the eyes of the public or in front of the eyes of  
2 the Commission or anybody. He would say, this is the risk  
3 of that loss. And the decision might be made that no matter  
4 what the risk was, even if it was — as long as it was  
5 non-zero — that the hazard of putting the structure there  
6 is so great that we won't accept any risk, and therefore the  
7 structure should not be sited there.

8 That would be one way to look at the problem. At  
9 another site where you had very little potential damage  
10 downstream, than a much higher risk would be maybe accepted.

11 I don't know whether that answers specifically  
12 what your question is.

13 DR. OKRENT: I was just wondering if your  
14 Interagency Committee was planning to come up with possible  
15 numbers to put in such a thing or how the Bureau of  
16 Reclamation approaches the same question. They have a lot  
17 of large dams which, let's say, don't have perhaps the three  
18 quarter million potential, but they certainly have hundreds  
19 of thousands, I would guess.

20 MR. VON THUN: The Interagency Committee I don't  
21 believe will come up with the numbers. We don't really have  
22 the background on the Committee or even the diversity to  
23 allow coming up with those numbers, nor have we done the  
24 studies. But I think that the report of the overall  
25 Committee is going to be out within a few months. It is

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1 supposed to be out within a few months, and there is just no  
2 way that those numbers could be developed and generated.  
3 And I don't think it is right at this point to do it because  
4 there isn't enough background to establish what those  
5 numbers should be.

6 As far as what the Bureau's approach is, which by  
7 the way, their new name is the Water and Power Resources  
8 Service -- the Bureau's approach, which is really my  
9 approach or one that I think should be used, is that we  
10 can't establish the numbers until we have looked at a number  
11 of different sites and started getting some information.

12 The example, which I'll show you in a moment, on  
13 Jackson Lake is currently the only real example where we  
14 have some idea -- and maybe not even all that accurate an  
15 idea -- but some idea of what the risk is on one structure.  
16 Decision-makers need to have a whole background of what  
17 these risks are in existing facilities and on other types of  
18 risks, not only for seismic risks but for flood, for normal  
19 resevoir loading, for any of the loadings. They have to get  
20 an idea of what risk are we exposing the public to  
21 involuntarily compared to what risk the public is exposing  
22 them to voluntarily in order to come up with that number.

23 So to just pick the number right now is not  
24 valid. What we feel is that we should go through this, look  
25 at all of our existing dams or a large number of them, find

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mgcHEE 1 out what the actual absolute risk of a failure is to a  
2 number of events, and then we will be in a position to pick  
3 that number.

4 DR. OKRENT: Dr. Shinozuka?

5 DR. SHINOZUKA: I am seriously concerned about the  
6 uncertainty involved in the estimation of probability of  
7 failure of a structure. This point has been raised, but  
8 since I am more or less working in the structural analysis  
9 and design area, I feel that the uncertainty involved in the  
10 estimation of probability of failure of the structure would  
11 be something we really have to address ourselves to.

12 I feel at this time that the methodology has not  
13 really been established. If you look at some of the papers  
14 dealing with this problem, the best you can see is the  
15 application of, shall we say, first order statistics  
16 involving just expansion of the first two times, evaluating  
17 variants, and apply certain subject judgments in estimating  
18 the uncertainty and crank out numbers.

19 It is even difficult to apply this to a relatively  
20 simple structure consisting of a number of elements. So my  
21 point here is that I think at all levels, federal levels and  
22 also university community research for example, I think we  
23 should take up this problem more seriously and look into it  
24 very carefully so that these risk assessment methodologies  
25 can become reliable.

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1 MR. VON THUN: I absolutely concur with you. I  
2 think that the weakest link in what I will be presenting  
3 here and the weakest link that faces us is in predicting how  
4 the structure is going to fail, if it is going to fail, and  
5 what the likelihood of its failure is. That is the weakest  
6 link, and it is not in risk assessment methodology. The  
7 methodology for the risk assessment there. It is in  
8 understanding the failure, being able to decide what its  
9 response is, and what its likelihood of failure is.

10 Once somebody can tell you that, then the risk  
11 assessment can go ahead and be performed. And even maybe an  
12 add-on to that is the foundation, like on a dam structure.  
13 We might know quite a bit about the materials that go into  
14 the dam and quite a bit about how the dam is going to  
15 respond itself, but the uncertainty in the foundation is  
16 even greater.

17 DR. SHINOZUKA: My difficulty is that although you  
18 mentioned that methodologies have been established, but if  
19 these methodologies require the information that we may  
20 never be able to get, then we are in trouble.

21 MR. VON THUN: That's right. And our approach  
22 really is not to say that this is going to work. It is to  
23 try and see if it works and see where the loopholes are.  
24 That is our approach, rather than feeling it is an absolute  
25 foregone conclusion that it will work.

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DR. OKRENT: Maybe it would be good to go on to your next part, and then we can discuss both parts of your presentation.

(Slide.)

MR. VON THUN: What I would like to talk about is the second handout. The top got cut off. It should say, "Decision Analysis Model to Determine Reservoir Restriction Level at Jackson Lake", and the situation at Jackson Lake which happens to be in the Teton area -- the Grand Teton, Jackson Hole country.

This was a dam that was built back when a method called hydraulic fill was used where the dam was actually placed by putting in wet material and letting the wet material run out, so it was a very loosely placed dam. And a dam placed like this is subject to what is called liquefaction. When an earthquake takes place, the soil shakes. The core pressure or water pressure within the material builds up, and the material can actually flow.

Van Norman Dam in California, in response to the San Fernando earthquake, had partial liquefaction, and Sheffield Dam in 1926 had a complete failure due to liquefaction.

So as part of the reanalysis of our existing dams, which amounts to about 300, this was one of the dams that we took a look at, and it was recognized that this site was

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1 near to where there were faults, and there could be strong  
2 shaking at this site, and it was subject to liquefaction.

3 Professor Seed and Professor Lee from the  
4 Univeristy of California took a look at this site and made  
5 the recommendation. So we had a resevoir there that was  
6 quite important as far as the public was concerned. A  
7 number of people go there for recreation benefits. The lake  
8 also supplies irrigation benefits in the lower Snake Valley  
9 below this dam, so as far as the Bureau was concerned, it  
10 was important to maintain the resevoir as high as practical  
11 but also to reduce the risk.

12 So what I'm going to go through here is the  
13 decision-based risk analysis that we used in order to decide  
14 what the level of the lake should be kept at. To do this,  
15 the first point was to look at what the hazard was as a  
16 function of resevoir level for the potential failure modes,  
17 and we had a failure mode where the entire dam went out at  
18 its base, height, and one way it went out at the top of the  
19 zone where it had been placed by hydraulic fill. So we  
20 looked at two different modes of failure, and we showed that  
21 as the resevoir load lowered what the potential damage  
22 downstream would be, given that a failure occurred.

23 I'm going to go through these in a little more  
24 depth. I just want to go through the steps first.

25 The second thing was to estimate the probability

mgcHEE

1 of various levels of earthquakes causing liquefaction at the  
2 dam. We had several source areas that could produce  
3 earthquakes, and they could produce earthquakes of different  
4 sizes with a different probability. Given that that  
5 probability occurred or that that earthquake occurred, there  
6 was some probability based again on our evidence from around  
7 the world with regard to liquefaction that an earthquake of  
8 this magnitude might and it might not produce liquefaction  
9 in the dam.

10 A stronger earthquake would have much more  
11 likelihood of producing liquefaction, so we had a  
12 probability that the earthquake would occur, a probability  
13 that the dam would liquefy from this earthquake given a  
14 probability that liquefaction would occur at the dam site.  
15 If liquefaction occurred at the dam site and the dam had  
16 several probable failure modes, it might completely level  
17 out. It might level out only a few feet or something in  
18 between.

19 So we had to estimate the probability of damage as  
20 a function of resevoir level, because if we said that it  
21 could go through these different steps of failure and we put  
22 the resevoir at different levels, then there were different  
23 probabilities that the dam would fail for each of these  
24 failure modes.

25 If there are any questions as I go through this,

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mgcHEE 1 you can ask them.

2 MR. ETHERINGTON: Yes. Why does a magnitude seven  
3 have different liquefaction probabilities in A, B, and C?

4 MR. VON THUN: Because of distance.

5 MR. ETHERINGTON: Oh, I see. It is distance.

6 MR. VON THUN: One source may be closer to the  
7 site than another. I will have one up there in a little  
8 more detail that shows that.

9 DR. CASTENBERG: On the column, "Earthquake  
10 Probability", is that probability per year? How do we  
11 interpret that?

12 MR. VON THUN: That is annual probability. Those  
13 are hypothetical numbers.

14 DR. CASTENBERG: Right.

15 MR. VON THUN: But this is how we did it with  
16 regard to annual probability, and then over the lifetime of  
17 the structure. We typically work either with annual  
18 probability or probability in 100 years -- one of those two  
19 modes.

20 (Slide.)

21

22

23

24

25

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pv HEE 1           The next thing to do is to compute the probability  
2 of overtopping as a function of reservoir restriction level  
3 for each failure mode. So, we would take the probability  
4 that the earthquake could occur times the probability that  
5 it would cause liquefaction times the probability that there  
6 would be a certain failure mode on the dam, and then look at  
7 the reservoir level and see whether that caused overtopping  
8 or not.

9           And that gave us an absolute probability of  
10 overtopping as a function of the reservoir level, and we  
11 were able to work out this probability for the mode 1 type  
12 failure, which was in the upper part of the dam, and the  
13 mode 2 type failure. You see the mode 2 type failure was  
14 not -- in this particular case does not show much  
15 sensitivity to a drop in reservoir level.

16           Then the fifth step is to examine the likelihood  
17 of overtopping and downstream hazard potential for the  
18 current criteria versus any proposed revised criteria and  
19 then evaluate the total reduction in the risk of each mode,  
20 the acceptability of risk for each mode, and consider the  
21 benefits of reservoir elevation, operating procedures for  
22 maximum benefits within the range of acceptable risks.

23           Now I will go through those steps in a little more  
24 detail.

25           (Slide.)

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1                   This is -- what I am showing now is sort of a  
2 fundamental approach that we would use with regard to  
3 seismic probability consideration in any of the studies that  
4 we do. We have a site here, and we have several sources  
5 that could affect this site with regard to earthquakes.  
6 Here is a fairly large -- this is where the Hebgen Lake  
7 event occurred. We said a maximum earthquake of 7.5 could  
8 occur at this site. This is quite some distance away.  
9 Anything less than the seven to 7-1/2 range would not  
10 produce a problem at the site.

11                   We had -- there is another source here, the  
12 intermountain seismic belt. It could produce an earthquake  
13 of 7.5 which might affect the site. And then there are two  
14 sources near the site that could produce earthquakes from  
15 6.0 to 7.25.

16                   (Slide.)

17                   Now, each of those sites could produce earthquakes  
18 with this probability. The question was asked earlier about  
19 how we make the determination with regard to the probability  
20 of the event. This is based on historic record. There is  
21 no earthquake of 7-1/2. There is an extrapolation to get to  
22 7-1/2, to get the probability of that magnitude of event.  
23 There happens to be geologic evidence in the area that shows  
24 us how much offset has occurred over the last 10,000 years,  
25 and putting that into magnitude 7-1/4 earthquakes down to

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1 six earthquakes to account for that displacement, we are  
2 able to come up with a recurrence relation based upon  
3 geologic evidence, and then that is correlated with the  
4 historic evidence of seismicity in that area. We have a  
5 fairly good correlation.

6 So this type of relationship was used to get the  
7 annual probability of earthquakes of a certain range, and we  
8 have to talk about a range -- seven to 7-1/2, six to 6-1/2,  
9 like that -- in order to encompass the total probability of  
10 earthquakes.

11 And the other question about uncertainty that was  
12 asked -- this is how we take care of -- the gentleman asked  
13 about the range of expected value and so forth -- this is  
14 how that is taken care of: by looking at the bigger  
15 earthquakes. They have a higher probability of causing  
16 damage, but they have a lower probability of occurring. But  
17 by taking them into groups like that, you can look at that  
18 fairly realistically.

19 (Slide.)

20 The next thing to do is to say, "Okay, now, from  
21 all of these earthquakes we've looked at" -- I think I got  
22 that out of order, but the idea is the same: we need to  
23 look at which earthquakes can cause liquefaction and which  
24 cannot cause liquefaction. These, we say that any  
25 earthquake within any of the zones at a certain distance and

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1 a certain magnitude that falls in this range, we will say  
2 that the probability of that causing liquefaction is zero  
3 and it no longer needs to be considered in the risk  
4 analysis.

5 This has to be low enough so that we encompass  
6 even a minor amount of liquefaction. To get that, we use  
7 the worldwide data and the advice of our consultants on what  
8 might cause liquefaction.

9 (Slide.)

10 These Xs are examples of where liquefaction was  
11 caused at various distances, and you can see from this that  
12 where we have historical examples of liquefaction, we are up  
13 in here with fairly large magnitude earthquakes, but there  
14 have been some cases where we had small magnitude  
15 earthquakes. This lower-bound curve then encompasses all  
16 possible liquefaction-producing events. But if we did have  
17 an earthquake up in this level, the chance of there being  
18 liquefaction has got to be considered greater than if we had  
19 an earthquake at this level, say, at this distance. And  
20 that is one of the reasons for those probabilities varying.

21 DR. OKRENT: The Sheffield Dam you mentioned,  
22 which failed and liquefaction occurred, what was the  
23 magnitude of the event or the intensity at the site?

24 MR. VON THUN: I can't remember offhand. I think  
25 it was on the order of a magnitude seven, but I don't

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1 remember offhand.

2 (Slide.)

3 This is just a reproduction of the little box that  
4 we saw earlier except these are the actual numbers that were  
5 used in the assessment. The A-1 source and the A-2 source  
6 each had the same probability of earthquake, but because the  
7 A-1 source was closer it had a higher probability of  
8 liquifying the dam. We only considered earthquakes from the  
9 other two sources in the range 7.25 to 7.5. The one at a  
10 greater distance had a lesser probability of liquifying the  
11 site.

12 Then, by summing all of these, all areas combined  
13 -- because we can't just look at one of the areas, we have  
14 to take the total probability of liquefaction and combining  
15 all of the areas -- this said that there was essentially one  
16 chance, annually, one chance in 100 of there being some  
17 liquefaction at the site.

18 This was a lot greater than I would have guessed,  
19 than I guess even right now, but this is the way, when we  
20 went through the analysis, these are the subjective numbers  
21 that were applied. I think we would make actually -- this  
22 probably should be maybe more on the order of one in 1000  
23 because the dam has been there for 50 years thus far and  
24 there hasn't been any indication of liquefaction. But if  
25 one had to make it an assessment of putting a dam there had

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pv HEE 1 there never been one, I think there isn't anything basically  
2 wrong with these estimates from the data that we have  
3 worldwide and from the estimates that were made on the  
4 condition of the structure.

5 But this is exactly the problem that you raised.  
6 It is our estimate of what the structure would do is --  
7 whether there would be liquefaction of the structure or not  
8 is pretty tough, but we tend to be conservative in all our  
9 estimates.

10 (Slide.)

11 Engineers in general tend to take the conservative  
12 approach.

13 Now, the part that is not here in any detail is  
14 the next phase, where we say -- but it is in the report  
15 which was handed out -- which again is saying what the  
16 structure will do given that liquefaction occurs.

17 Now, when Sheffield Dam failed, it failed down to  
18 20 percent of its height. When Van Norman Dam failed, it  
19 only failed about to 70 percent of its height; in fact, the  
20 reservoir was not lost when Van Norman failed. Those are  
21 the only two examples that we have.

22 And what we did was: we said there are three  
23 possible failure modes -- 90 percent of height -- I can't  
24 remember the others -- 10 percent of height, and maybe 50  
25 percent of height. It is in the report. We said there are

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pv HEE 1 three different possible failure modes of the structure, and  
2 three different possible earthquake levels: the strong  
3 earthquake, the medium earthquake, and the small  
4 earthquake. The small earthquake had some probability of  
5 causing a full failure down to 90 percent, but it had a  
6 lesser probability.

7 So, by taking each of those conditions of the  
8 structure and each of the probabilities of earthquakes at  
9 different levels, we made an estimate of what the  
10 performance of the dam would be under the strong shaking.  
11 And this is by far the weakest part of the analysis. In any  
12 case, making that analysis, we were able to look at what the  
13 risk level would be due to lowering the reservoir  
14 elevation. And we found that if we lowered the reservoir  
15 elevation to 6756 we were cutting the risk by 50 percent,  
16 what we consider to be our absolute risk.

17 It wouldn't make a lot of difference that these  
18 numbers are probably not all that accurate, but we feel that  
19 they are relatively accurate. This might be a couple of  
20 other zeros on here or maybe one other zero. But the shape  
21 of the curve, we feel, is fairly accurate.

22 So, from this we saw that we could reduce the risk  
23 from this mode 1 type failure which we thought was the most  
24 likely mode. We thought we could reduce the risk  
25 considerably.

pv HEE 1           The other element after looking at how the risk of  
2           overtopping could be reduced, the next question is: as we  
3           lower the reservoir, the more we lower the reservoir the  
4           less damage even if we had overtopping.

5           (Slide.)

6           So, those two things work for you: you keep  
7           reducing your damage as you go down, and you reduce your  
8           likelihood of damage. So, this relationship that showed the  
9           damage cost, right here, versus reservoir elevation, we can  
10          then look at what is a good combination between lowering the  
11          probability of there being overtopping and lowering the  
12          damage with a new reservoir level.

13          And it turned out that if we went to any flow  
14          greater than 50,000 second-feet, then we felt that we were  
15          getting to fairly high damages: \$500 million in property  
16          damage and associated loss of life, risk of loss of life.  
17          It turned out that any flood less than 30,000 cfs would stay  
18          within levees provided downstream by the Corps of  
19          Engineers. So, it turned out that that happened to coincide  
20          quite well with this risk-reduction level of 6756.  
21          Actually, 6756-1/2, which hit about right here, would keep  
22          us within 25,000 second-feet as being the maximum flood that  
23          could be produced downstream.

24          So, the decision was fairly obvious: to stay  
25          below this level and reduce the risk of overtopping by about

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1 half of what it was if we did not change the criteria.

2 We then proposed the -- the way our agency works  
3 is we have regional offices that deal with the public and  
4 deal with actually making the designs. Our office in Denver  
5 does all of the analyses. So, we proposed this to the  
6 people who are in charge of operating the plant. They said,  
7 "Let us propose an alternative rather than just leaving the  
8 reservoir at one fixed level all year. Let's look at how we  
9 might operate the reservoir so that we can get maximum  
10 utilization for irrigation and for recreation and keep the  
11 risk within a level that you've supplied."

12 So, they proposed a different operating criteria,  
13 which in fact kept the risk level just as we had specified,  
14 although they did raise the height of the dam during one  
15 month of the year.

16 (Slide.)

17 So, the hazard during one month of the year is a  
18 little higher.

19 I didn't mention in this total probability  
20 formulation we also took into condition the operating  
21 criteria which showed the reservoir up and down during the  
22 year. The probability that the reservoir was at a certain  
23 height was taken into account in the total risk assessment.

24 That is the overview of that study.

25 DR. OKRENT: What did you do about the mode 2

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pv HEE 1 failure? That was the more serious one.

2 MR. VON THUN: The mode 2 failure, we essentially  
3 said that its risk was lower. This was in an area that was  
4 essentially not as subject to liquefaction. We said that  
5 the mode 2 failure had a much less likelihood of occurring,  
6 and so its total risk was less. But we did absolutely  
7 nothing about changing it.

8 The only way it is affected is that when we lower  
9 the reservoir to this level, its chance of failure if it did  
10 occur would be less flow out of the reservoir. But there  
11 wasn't anything specifically done or any decision based on  
12 the mode 2 failure.

13 The same results occurred as far as lowering the  
14 reservoir, but the chance of a mode 2 failure wasn't really  
15 a factor.

16 DR. OKRENT: I agree. But the mode 2 failure  
17 probability is only a factor of 10 smaller on your figure.

18 MR. VON THUN: That's right.

19 DR. OKRENT: I gather the mode 2 failure leads to  
20 larger amounts of water.

21 MR. VON THUN: Yes.

22 DR. OKRENT: Greater damage, greater loss of  
23 life. I don't know. You didn't mention what kinds of loss  
24 of life could be associated with a mode 2 failure. What  
25 would it be in the summer?

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1 MR. VON THUN: In the summer there is recreation  
2 downstream where there are boaters. The chance of the mode  
3 2 failure actually producing overtopping -- I mean,  
4 producing a worse flood wave isn't really known. It just  
5 means that the failure would occur lower in the structure.  
6 Actually, the chance of overtopping is similar.

7 DR. OKRENT: So you have no basis for assuming  
8 that a mode 2 failure means more water or greater flooding?

9 MR. VON THUN: That's right. The difference being  
10 -- well, the total risk of its flooding is the same as the  
11 mode 1 failure.

12 DR. OKRENT: I guess I don't understand. I would  
13 have assumed, if you are failing down to a lower level,  
14 unless you assume once overtopping occurs you lose the whole  
15 dam anyway -- what is your assumption?

16 MR. VON THUN: We made several different  
17 assumptions about how that would fail. We had a 200-foot  
18 breach, a 400-foot breach, and an 800-foot breach. So, it  
19 was the same under both conditions.

20 But really, the answer is we essentially ignored  
21 the mode 2 failure as far as making any decisions on what to  
22 do about the reservoir and whatever risks are remaining,  
23 whatever residual risk is there for mode 2. Since it was  
24 not essentially impacted by lowering the reservoir, we did  
25 not do anything. We did not make a decision on that basis.

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pv HEE 1 Now, this is not -- just for information, this is  
2 not the final answer. At Jackson these were interim  
3 criteria while we decide what to do about the structure in  
4 terms of reinforcing it or rehabilitating it. But in the  
5 meantime we wanted to come up with a restriction level that  
6 would be meaningful. And the analysis actually said we  
7 can't do much about the mode 2 failure.

8 DR. OKRENT: I understand that. But what I am  
9 getting at is the probability of overtopping from a mode 2  
10 failure, if I read the graph, roughly is about  $2 \times 10$  to the  
11  $-4$  per year.

12 MR. VON THUN: That's right.

13 DR. OKRENT: And the only thing you can do is take  
14 the water out of the dam to some level where there would be  
15 no flooding, in order to avoid it, I guess is what you are  
16 saying.

17 MR. VON THUN: That's right.

18 DR. OKRENT: So you are accepting some such risk  
19 here.

20 MR. VON THUN: That's right.

21 DR. OKRENT: That doesn't surprise me that it is  
22 this sort of magnitude. I think it is probably larger at  
23 various other dams.

24 MR. VON THUN: And that is what we intend to find  
25 out. The approach that we're doing is that this is the

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1 first; we actually made a decision on this basis; there were  
2 other analyses that were companion to this, but the decision  
3 was made all the way to the commissioners' offices on the  
4 basis of this. But it is the first example where the  
5 decisionmakers have actually seen any numbers like this on  
6 which they are making a decision.

7 Now, the program that we have right now is a  
8 reevaluation of existing structures, and we are taking two  
9 dams -- one in a concrete dam and one in an earthen  
10 embankment -- and trying to go through the total risk  
11 situation -- this is just seismic risk -- and get a  
12 comparison of what is the risk under just normal reservoir  
13 loading, what is the risk under earthquake loading, what is  
14 the risk from overtopping due to a flood, that we have  
15 allowed some probability, what is the risk due to a  
16 landslide -- all of these different risks -- and put them  
17 all in one package.

18 The University of Utah is doing exactly the same  
19 thing for us at another dam, and there are several other  
20 universities that are making these sort of studies, trying  
21 to move into the more practical application.

22 I think MIT has a grant -- I am not sure -- I  
23 think it is an NSF grant to make a study of total risk  
24 assessment.

25 DR. OKRENT: They do have one, I believe, some

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pv HEE 1 sort of risk-benefit methodology.

2 MR. VON THUN: My feeling is that that is where we  
3 need to go in any of these things, is to try and generate  
4 these numbers. If we find out that we have serious  
5 deficiencies -- which I believe we will -- then that is the  
6 area that we ought to look into as far as risk assessment.

7 I think that we have spent plenty of time to date  
8 in looking at some of the minor ramifications, like the  
9 statistical analysis of peak acceleration; we have done all  
10 kinds of refinements on peak acceleration. It isn't even a  
11 particularly good parameter to use in judging the  
12 performance of the structure, and yet we have had study  
13 after study that looks at that particular parameter.

14 We need to go and find out the areas where we  
15 don't know very much and see if anything can be done.  
16 Another example would be, say, looking at a concrete dam.  
17 We do make hundreds of tests on the cylinders that go into  
18 the concrete that goes into a concrete dam, and we can make  
19 a good statistical evaluation on the chance of that being  
20 less than the 4000 psi which we planned for it to be in  
21 there.

22 But there isn't a concrete dam around that's going  
23 to fail compression due to that mode of failure. A  
24 foundation failure which we have very little assessment on  
25 is the way that it would fail, and that is the type thing

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1 where we have to do this total risk assessment and see where  
2 we really have the weak areas and at that point decide  
3 whether the method is usable or not usable.

4 DR. GRIESMEYER: You said you had an option of  
5 raising the level for one month so that you can use it for  
6 recreation or better irrigation. And presumably, you kept  
7 the expected risk of overtopping constant; you lowered it a  
8 little bit during your low time and raised it a little bit.

9 MR. VON THUN: That's right.

10 DR. GRIESMEYER: And this is good if the expected  
11 value of risk is a good thing to limit. Now, if the  
12 uncertainties are large, it may be really during that one  
13 month you have an unacceptable risk.

14 MR. VON THUN: That's right.

15 DR. GRIESMEYER: Even though the expected value  
16 over time is constant.

17 MR. VON THUN: That's right. And if it was  
18 regarded — if we had regarded that it was unacceptable,  
19 then that's what we would have done. We said, "No, you  
20 can't do it because we still have a large enough hazard here  
21 that we will not accept the chance, the one in 12 annual  
22 chance, of there being an earthquake during that period of  
23 time."

24 DR. GRIESMEYER: And then you also have  
25 uncertainties in these estimates. If you're lucky, you've

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1 got a couple more zeros there in front of it; if you're  
2 unlucky, you have a few less zeros and then it becomes a  
3 more serious event.

4 MR. VON THUN: And we did not, in this study, go  
5 into uncertainties. We intend to try and put in  
6 uncertainties in a meaningful manner on the work that we're  
7 doing now. We have a team composed of some people who are  
8 expert in risk analysis; the rest of the team is composed of  
9 people who work in dam safety and design. We feel that it  
10 is good to have those people in as a coordinated group.

11 And we intend to have the whole process reviewed  
12 by university people working in risk analysis, when we are  
13 through, to try and get an accurate assessment on an  
14 accurate use of the uncertainty. If we allowed uncertainty  
15 to go unchecked, I am sure that it would completely dominate  
16 our studies because there is so much uncertainty.

17 What we are to try and band — the question was  
18 asked about how do we deal with structure performance — to  
19 try and get some control on this number over here, we took  
20 all of the data developed by the Corps of Engineers under  
21 the National Dam Safety Act, when they went and got  
22 information from the 49,000 dams that are in the U.S. We  
23 have information on all dam failures. We are going to — we  
24 have a program where we have all of that information on a  
25 data base — we are going to put dams in categories of

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1 height, type, location in the country, so that we know what  
2 their exposure is and develop an exposure function and then  
3 look at what their performance has been.

4           And that will give us some idea here, as an  
5 empirical value, than, on the other hand, we're going  
6 strictly on what I call the "calculated approach," where  
7 we're trying to have engineers actually compute, given that  
8 this is the loading, whether it be reservoir loading,  
9 maximum reservoir loading, or earthquake or flood, what is  
10 the probability that that dam will fail. And then we will  
11 have that calculated number to compare against the  
12 performance number and see whether there is any correlation  
13 at all.

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DR. OKRENT: Dr. Shinozuka?

DR. SHINOZUKA: I would like to know your assumption about liquefaction. When you say liquefaction has occurred, does that mean liquefaction has occurred throughout the dam or at a certain location of the dam?

MR. VON THUN: We assume that it occurred at a certain location of the dam.

DR. SHINOZUKA: And you have a procedure from which you can then evaluate probability of the dam failure?

MR. VON THUN: Yes, and also probability of damages. Each of these types of cases, as I mentioned earlier -- every one has to be considered on a case by case basis. There was a certain zone, many of the dams that are built are built in parts. First one agency builds this part, and then the farmers add this part, and somebody else adds another part. And so, at this particular site we had a certain area that was subject, more subject to liquefaction than other areas. And so that was taken into consideration.

DR. SHINOZUKA: Another question. This probability of dam liquefaction under certain adverse conditions, these probabilities will be given by some experts, or there are ways in which you can compute these probabilities?

MR. VON THUN: There are ways in which you can compute it. This particular analysis was not done, you will note when you read the paper. Did you make adequate copies?

1 There are dynamic analysis methods that can predict the  
2 performance of the structure. These are plagued by not having  
3 enough real life examples to compare with. But they can give  
4 you an estimate of what the performance has been on the basis  
5 of what we've seen in those analyses, plus what we saw at  
6 Sheffield Dam.

7 That is how the analysis was made. All you have  
8 here is the summary report. The total report has all of the  
9 appendices, the comments of Professors Seed and Lee, the  
10 studies on the hazard that the USGS made and others. I just  
11 brought the summary report along, and I don't know whether it  
12 has the Sheffield earthquake magnitude in it or not.

13 If there are no more questinos on Jackson Lake --  
14 are there?

15 DR. OKRENT: I think Dr. Wilson has a question on  
16 something.

17 DR. WILSON: Yes. I would like to ask a general  
18 question. I have a colleague who has been connected with  
19 dams for some years, Arthur Cassagrande, with whom I've  
20 discussed these matters. And I know he has always been -- he  
21 maintains, of course, that a properly designed dam will just  
22 not fail.

23 And there, of course, the question is on the  
24 adjective "properly." And when we try and get around to that,  
25 it turns out that there's a difference of opinion of himself

1 and some other people in the business. And of course, all the  
2 dams he designed he feels are properly designed, and so on.

3 Is there any way of taking account of what appear  
4 to be or what certainly, on some of the older people in the  
5 business, are major differences of opinion in how one should  
6 go about some of these dams?

7 MR. VON THUN: On how they should be designed?

8 DR. WILSON: Yes. As far as I can make out, if  
9 perhaps they don't persist in the younger people who are  
10 designing dams now, know about it; but they persist certainly  
11 in the people of Arthur Cassagrande's age, the difference of  
12 opinion as to whether some dams are well-designed or not  
13 well-designed.

14 And if you picked two consultants working on this  
15 from one group of opinion, you might completely not get the  
16 proper spread of the uncertainty.

17 MR. VON THUN: I don't know. There are certainly  
18 ways to crank that in. When we are dealing with remote  
19 problems, we start with, say, an earthquake that has a  
20 maximum credible earthquake, I mentioned earlier, might have  
21 a likelihood of one times  $10^{-5}$ , the likelihood that the dam  
22 failed if it is designed well. If you have someone like  
23 Arthur Cassagrande and he would say, gosh, I'm sure my dam  
24 isn't going to fail.

25 And then you're talking and you say: Well, how

1 sure are you? Is there one chance in a hundred that it will  
2 fail? And so you then talk about one chance in a hundred times  
3 one chance in 10,000 that there would be a failure event.  
4 And then you talk about, well, how much failure is failure.  
5 And so a total failure -- there might only be one chance in  
6 100 that, given that there is some failure, there might be a  
7 total failure.

8           So now you're talking about something like one times  
9  $10^{-9}$ . To crank in a difference of opinion on how one person  
10 thinks of a design versus how another thinks of a design may  
11 not be all that meaningful in generating that total number.  
12 But there are certainly ways to do it, because you could then  
13 say: Well, if he says this is the way, and he says this is  
14 the way, and you really think there is serious concern, then  
15 you would just lower that factor in of one to 100 which the  
16 person said could occur maybe to one in 10, to account for  
17 the fact that there is a dispute over how it should really be  
18 designed.

19           So I think that that is about as responsive as I  
20 can be to that question. We have tried in the Corps of  
21 Engineers data, which records whether or not the structure is  
22 engineered or not engineered, because a number of the 45,000  
23 dams in the U.S. were not actually engineered at all -- and  
24 also, some of them are inspected regularly and some are not  
25 inspected regularly.

1 In our function of deciding which ones are more  
2 likely to fail or not to fail, we are going to crank in that  
3 sort of information to make that judgment.

4 Okay, the very last sheet of your handout on the  
5 Jackson Lake paper doesn't have anything to do with the  
6 Jackson Lake paper, but it was just included in this handout.  
7 This is from another study that we made, again only to do with  
8 seismicity. This was more of a study to decide what number  
9 we would assign as being an acceptable number for seismic  
10 risk.

11 And our problem here is that in certain areas of the  
12 country, rather than having a specific fault to deal with,  
13 we might have earthquakes at random location. This is more  
14 prevalent in the areas such as Nebraska, Wyoming, North and  
15 South Dakota, Kansas, and those areas. Here an earthquake  
16 could occur right under the dam site, with some probability.  
17 Or it could occur at a certain distance from the dam site with  
18 some probability.

19 The likelihood of occurring right under the dam site  
20 is extremely remote. And the question here was: What type  
21 of probability should be assigned in deciding the distance  
22 from the site that one should assume the design earthquake?  
23 And in making this study which was handed out, which I believe  
24 Mr. Quittschreiber delivered to the members of the Committee,  
25 I took a look at what some of the probability factors that

1 were used for seismic design throughout the country. And  
2 this table is a presentation of what those are, at least the  
3 ones that I found.

4 Just for reference, the 100 year flood shows a  
5 probability of annual occurrence at .01. A number of struc-  
6 tures throughout the country are designed to handle the  
7 100 year flood. But the probability of exceeding the 100 year  
8 flood is actually quite great over a 100 year period. And  
9 the probability of a 200 year flood is even greater.

10 The California legislature developed a criteria  
11 that said that any fault that has shown movement within the  
12 last 10,000 years is to be considered an active fault for  
13 purposes of locating residential structures. . In other words,  
14 if a fault had moved, theoretically, 10,001 years ago, then  
15 you could site your house on top of that fault. So the  
16 accepted probability there is an annual occurrence of .0001,  
17 and in a 100 year period it's probability of, say, reactivation,  
18 is .01.

19 The probability of not reactivation or not exceeding  
20 this in a 100 year period is .99.

21 The seismic risk map, which is now, I believe --  
22 has to be considered a misnomer. We don't talk about the  
23 seismic risk, because we really should talk about risk as  
24 being the total picture. I would rather refer to that as the  
25 seismic exposure.

1 In any case, that shows a probability or gives the  
2 probability of a particular level of acceleration occurring  
3 without being exceeded, a 90 percent probability of not being  
4 exceeded in 50 years, which boils down to a once in 475 year  
5 event. And that probability of nonexceedence in a 100 year  
6 period is .81.

7 There was a study done, reported at, I think I said  
8 earlier, the conference that I was referring to. I think that  
9 report was in Pasadena. Actually, it was at Stanford. This  
10 report, the case history, is for an MCE; was reported two  
11 years ago at Pasadena. And this was an example used by an  
12 investigator, and his probability for the MCE was .00004, and  
13 that gives a probability of occurrence in a 100 year period  
14 of .0004, and nonexceedence in a 100 year period of .996.

15 The NRC criteria of an earthquake, an active fault,  
16 now called a capable fault, of one movement in 35,000 years,  
17 or multiple movements in 500,000 years, I have interpreted  
18 those to mean -- just for this illustration, that would mean  
19 that if a fault had occurred -- a fault had last moved  
20 35,001 years ago, then it would be considered inactive. So  
21 anything that is an accepted probability for seismic loading.

22 And the occurrence of multiple movements, I said  
23 more than two in 500,000 years. That boils down to .000006  
24 of that type of event being exceeded, and so that would give  
25 a nonexceedence in a 100 year period of .997 and .9994.



1 Those are just some examples of what could be interpreted as  
2 quantitative numbers for just the seismic risk -- I mean the  
3 seismic exposure.

4 DR. OKRENT: With regard to the NRC criteria, I  
5 think if you were to look at the return period for what is  
6 called the safe shutdown earthquake, you would have a higher  
7 probability of occurrence than the 100 year period by quite  
8 a bit. In other words, I think the numbers you are extracting  
9 from the criteria used for an inactive fault, a lower proba-  
10 bility of occurrence than one gets for the design against  
11 seismic shaking.

12 MR. VON THUN: This is the only quantitative numbers  
13 that I had.

14 DR. OKRENT: I realize that. I'm just mentioning  
15 this in passing.

16 MR. VON THUN: You're saying that the number would  
17 be like less?

18 DR. OKRENT: The exposure to shaking is larger than  
19 this by quite a bit.

20 MR. VON THUN: But there isn't anything quantitative.

21 DR. OKRENT: Not in the criteria. You have to  
22 evaluate it on a site by site basis.

23 MR. VON THUN: Yes. It would absolutely have to be,  
24 because there isn't anyplace, I think, that you can put it  
25 aside where you would not have some shaking. But as far as

1 deciding whether the fault is inactive or active-- but the  
2 Bureau criteria which we used for the Auburn site was movement  
3 once in 100,000 years was active. Anything greater than that  
4 was inactive. And that gives you the number .999.

5           So what we said in this study was that, as far as  
6 an order of magnitude estimate, that it was certainly conser-  
7 vative enough. And so, in making a determination, where what  
8 really was involved here is that, here is our site, there are  
9 random earthquakes occurring, and we had to come up with a  
10 distance from the site where we would say a design earthquake  
11 would occur or a maximum credible earthquake would occur.

12           And so, if this distance was based on the probability  
13 of that number right there, if there was a .999 chance that  
14 there would be no earthquake within this zone during a 100 year  
15 period, then that distance was specified. And in this case,  
16 it happened to be something like, I think, 22 miles. There  
17 were very few earthquakes around the area, but that gave a  
18 quantitative way of assessing where we would place the design  
19 earthquake.

20           On a completely arbitrary basis, we would have had  
21 to say, say if we had ignored the risk assessment, we would  
22 have had to say that the earthquake could occur right under  
23 the dam. So this is the only attempt that we have made to  
24 do a quantitative number like what you are talking about.

25 And I really think that it is great that people are struggling

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1 with putting quantitative numbers on just to find out whether  
2 it can or cannot be done.

3 It would be nice to do it and nice to be able to  
4 tell the public, this is what we're thinking of in terms of a  
5 total risk. Whether we can actually do it or not is another  
6 question.

7 MR. RUBINSTEIN: Was there any physical basis  
8 associated with that distance?

9 DR. OKRENT: Would you please give your name?

10 MR. RUBINSTEIN: David Rubinstein, NRC.

11 Was there any physical basis?

12 MR. VON THUN: The actual faults are handled as  
13 actual faults. In other words, we have more than one earth-  
14 quake for which we would design if we had an actual fault,  
15 say, located here, that we knew the distance to, then that  
16 would be used in the analysis, as well as the random earth-  
17 quake.

18 But in this case there was no structure. This  
19 distance was not based on any structure. It was just based  
20 on a seismotectonic zone.

21 MR. HARBER: Gerry Harber, NRC.

22 Is that not based on a continuation of the relation-  
23 ship?

24 MR. VON THUN: No, not at this point. A continuation  
25 relationship would then -- would occur here. Once you decided

1 where the earthquake was, then you would say: All right, we  
2 will consider a magnitude six or seven or whatever the earth-  
3 quake is at 22 miles. And there would be a certain amount of  
4 attenuation to the site.

5 But the differential in acceleration was not  
6 considered. We tend to specify the earthquake distance,  
7 focal depth, and then look at what its effect on the dam is.  
8 In most critical facilities, I think that is the way that  
9 most of the people that I am familiar with -- the geologic  
10 assessment is made first of when and where the earthquakes  
11 will occur, and then we take that earthquake and specifically  
12 work with it, rather than developing what might be considered  
13 isoacceleration maps and working with just an acceleration.

14 MR. HARBER: But your circle there is based on  
15 the seismicity. How did you get the value of the radius of the  
16 circle? Based on the seismicity of that area around the earth-  
17 quake within that area?

18 MR. VON THUN: Yes. In other words, you take a  
19 large area like this, and here's your site here, and throughout  
20 this large area you say that there is a random distribution  
21 of earthquakes, with some distribution, like I showed earlier,  
22 for a certain probability.

23 If you take one little spot on that within this  
24 large area, that little spot has a certain probability of  
25 there being an earthquake of certain magnitude in that area

1 out of the total area. So if you think about now, what we're  
2 really saying is that within the site area there are a number  
3 of these little unit areas that have a certain probability  
4 of producing an earthquake of a certain level. When you sum  
5 those and they equal or exceed the .999 probability of  
6 nonexceedence, then you define the area of limitation, where  
7 you say that there is .999 probability that there won't be  
8 an earthquake within this zone.

9 MR. HARBER: But what happens if the isoseismal  
10 area of maximum intensity is larger in diameter than your  
11 circle?

12 MR. VON THUN: I would say if that were the situation,  
13 it would have to be handled in a different manner. That would  
14 move you clear out, and you would say there wouldn't be any  
15 earthquake considered at all. I don't think that can happen.

16 DR. OKRENT: I'm going to have to interrupt this  
17 discussion, because we are about 11 minutes behind the agenda.  
18 It's not your fault.

19 Thank you very much. It was a very interesting  
20 presentation.

21 Why don't we take ten minutes and then resume.

22 (Brief recess.)

23

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2 DR. OKRENT: Our next speaker will be Michael  
3 McGee, who I am advised is an environmental scientist with  
4 the Office of Environmental Quality at HUD. He has a  
5 background in geophysics and geology as well as in public  
6 health, and worked with the Corps of Engineers before  
7 joining HUD. Mr. McGee?

8 MR. MC GEE: Thank you. My name is Mike McGee.  
9 As was said, I am with the Department of Housing and Urban  
10 Development. I am also a member of the subcommittee that  
11 Larry has referred to on the earthquake hazard assessment.  
12 I would heartily concur with many of the observations which  
13 he has made on his specialty, and in particular emphasize  
14 the need for recognizing the distinctness of the terms  
15 "hazard" versus the term "risk," and how many people  
16 interchange the two.

17 I think the question most often asked of me or of  
18 people in my office is, namely, what the Sam Hill Housing  
19 and Urban Development is doing in the process of risk  
20 assessment, hazard analysis, because very few people think  
21 of the Department as having any interest at all in such. I  
22 have been in this particular specialty area now for about  
23 2-1/2 years, and the Department for the past five years. We  
24 have been concerned about the aspect of hazardous materials  
25 from the standpoint of community safety, the safety of  
HUD-supported projects, whether they be housing projects or

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1 community development projects, community growth.  
2 Our basic issue is land use and the  
3 incompatibility thereof with regards to hazardous materials  
4 operations of facilities versus dense population centers and  
5 how community growth is being tailored. We have found, from  
6 our experience over the past, let's say five years, that the  
7 definition of risk assessment or namely answering the  
8 question of what is an acceptable risk, is really a problem  
9 in human nature. And it seems to be directly proportional  
10 to the public's awareness of that particular hazard.

11 The simplest case where the public is largely  
12 ignorant of a danger, they will accept almost any definition  
13 of what an acceptable risk is. Where the public's awareness  
14 of that hazard may be, let's say, equal to the actual extent  
15 of the hazard as known by scientists, engineers, given the  
16 state of the art limitations, the public is amenable,  
17 reasonably amenable, to some sort of reasonable definition  
18 of acceptable risk.

19 The most profound situation seems to be where the  
20 public's awareness is, shall we say, magnified of what the  
21 actual hazard or danger seems to be, and here the definition  
22 of an acceptable risk becomes a very sensitive issue, and  
23 very site-specific for that portion of the public's  
24 awareness.

25 We have been tending toward an education type

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kapHEE 1 approach, or an answer to try and address this problem, the  
2 idea being to make the public aware of all pertinent facts  
3 of the problem, trying to assure them that whoever the  
4 decision-maker is defining that acceptable risk, he has all  
5 essential elements well in hand.

6 The case history, if you will, which made us aware  
7 that the problem existed, was in South Carolina. Columbia,  
8 South Carolina, to be specific. It was a bulk storage  
9 facility of a utility company which contained 40  
10 60,000-gallon propane tanks, arranged in two rows. These  
11 tanks were of such a construction that they were horizontal,  
12 much like an elongated frankfurter, in their design, and  
13 such tanks, when they are involved in an incident, tend to  
14 rupture quite violently, with the ends proceeding almost  
15 like a missile and in roughly parallel alignment to the long  
16 axis of the tank.

17 In this case, the proposed housing project was  
18 located right directly near the ends of those tanks, the  
19 nearest house being 82 feet away from a 40,000-gallon -- or  
20 a 60,000-gallon container of propane. And the community had  
21 absolutely no idea why any of the engineers in the  
22 Department were somewhat concerned about the residents of  
23 the project which might move into that housing.

24 Our engineering analysis, which we had to proceed  
25 upon -- because, after all, the Department hadn't been aware

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kapHEE 1 of the problem, didn't have any criteria to apply, was that  
2 an explosion involving one tank would have wiped out 60  
3 percent of the residents of that total project, and we were  
4 talking about a project involving 1100 units of public  
5 housing.

6 The significance of Columbia, South Carolina,  
7 then, began to get us thinking as to how to define the  
8 problem, what sort of criteria we might need to prevent this  
9 type of thing from occurring again. And we began to  
10 question it: well, don't the local communities have codes  
11 or safety conditions? Because, after all, in recent years  
12 there has been a public trend away from federal regulation,  
13 an over excess amount of red tape, forms, et cetera, just  
14 for the sake of regulation.

15 We found that there wasn't, in fact, any, that the  
16 local communities didn't have safety standards, weren't  
17 aware of the problem as we had not been aware of the  
18 problem, or did not enforce whatever codes they did have.  
19 So we then recognized a need for safety provisions at a  
20 community level regarding hazardous materials facilities.

21 The principle involved two fundamental concepts  
22 which we defined. One is a safety separation distance.  
23 This is no 100 percent guarantee that -- it would be defined  
24 by an environmental safety standard giving an acceptable  
25 degree of risk from some adverse effect. In crude English,

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1 putting enough distance between that hazardous material  
2 container and, let's say, a public housing site or some  
3 occupied community facility, so that an incident at the  
4 hazardous material site would not adversely impact or  
5 seriously impact the residents or occupants of that  
6 facility.

7 The other fundamental point was to define a  
8 recognized danger zone. This danger zone would be that area  
9 physically impacted by that hazardous material, when an  
10 incident occurred with whatever conditions were operative at  
11 the time the incident occurred. And our principle was that  
12 safety separation distance, which we would prescribe by some  
13 means, would at least equal the worst case danger zone from  
14 that hazardous material container or installation or  
15 facility.

16 We then funded research, awarded a contract, and I  
17 have the several results garnered from that contract. One  
18 was a departmental guidebook with procedures to analyze  
19 hazards, namely, hazards from fire, hazards from blast or  
20 explosion and hazards from toxic substances, and some  
21 environmental safety standards. These environmental safety  
22 standards addressed thermal radiation and blast  
23 overpressure.

24 The safety standards which resulted were, one,  
25 designed to achieve safety for buildings, occupied

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kapHEE 1 buildings. The precise safety standard was 10,000 BTUs per  
2 square foot per hour of time interval, and this was to  
3 prevent self-ignition of the structure which might be in  
4 close proximity to an intense source of thermal radiation  
5 for a period of time.

6 The thermal radiation standard for the protection  
7 of people was 450 BTUs per square foot over an hour time  
8 interval, and it was designed to prevent the occurrence of a  
9 second degree skin burn on a person who might be in close  
10 proximity to that intense source of thermal radiation.

11 The blast overpressure standard was 0.5 psi and it  
12 was designed for the safety of the building structure to  
13 prevent the failure of that structure or the failure of a  
14 major component thereof, which might adversely impact  
15 anybody inside that building, from the blast energy.

16 Now, a little bit about the nature of the  
17 exposure. Now, note, I have been talking in terms of risk,  
18 hazard, but I haven't really talked about exposure. With  
19 respect to duration, we were saying the thermal radiation  
20 might be expected to last for as long as five minutes in  
21 that particular building. The thermal radiation might be  
22 expected to last as long as two minutes, to a person caught  
23 in an exposed area at the time of an incident. And of  
24 course, with respect to blast overpressure, the exposure  
25 would be instantaneous.

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1                   The assumptions were predicated that the local  
2 fire department could respond within a certain set period of  
3 time and act effectively to reduce the amount of thermal  
4 radiation incident upon that building's surface. The  
5 ability of a person to react and take protective cover  
6 predicated the definition in two minutes.

7                   Now, a lot of people would say that if somebody  
8 was threatened by a fire, it would certainly take drastic  
9 action long before two minutes occurred. Well, we as  
10 engineers, we were looking for a safety margin, and with  
11 respect to the statutory dictate of housing and urban  
12 development, we were looking for rather large safety margins  
13 in our result, for this reason, and that is the nature of  
14 the exposed population at whatever time that incident might  
15 occur.

16                   HUD had to be concerned about low and moderate  
17 income families. These families, it was felt, would have a  
18 high probability of large numbers of small children. A  
19 small child in a crib would not be able to take the same  
20 action as, say, one of your average human beings in the  
21 sample population, your normal statistical average, i.e. the  
22 child would not be able to run away effectively.

23                   Point number two: HUD was concerned with elderly  
24 citizens, people with restricted mobility. So once again, a  
25 10 or 15-second reaction time to a disaster might not be

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kapHEE 1 appropriate, especially if the project was designed for  
2 elderly citizens.

3 And point number three: handicapped citizens  
4 might actually necessitate a rescue or physical removal by  
5 someone else in order to ensure that they reached safety  
6 from such an incident.

7 So these were the concerns that we had when we  
8 built in our safety margins, and asked the research  
9 consultant to come up with environmental standards. The  
10 present status of our regulation now, or our policy now, if  
11 you will, is that we have produced an advance notice of  
12 proposed rulemaking which was published on the 10th of  
13 September in the Federal Register.

14 We are presently finalizing a departmental  
15 regulation addressing the hazards of thermal radiation and  
16 blast overpressure, and we are taking the position of  
17 attempting to accurately recognize hazard scenarios in the  
18 worst case and attempting to come as close as we can in  
19 practical terms to achieving a zero risk. By that, I mean  
20 if somebody defines a potential danger, no matter how safely  
21 that tank might be designed, no matter how safe you might  
22 call for certain housing design elements or blast wall  
23 protection or some shielding, there is always the human  
24 element involved, and we are talking about more sensitive  
25 portions, if you will, of the total national population --

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1 namely, elderly citizens and handicapped people and so on.

2 The duration of exposure and the exposed  
3 population caused us to get into risk assessment, which we  
4 have emphasized analyzing the hazard to achieve a low level  
5 assessment of risk. As a case in point, fire analysis, for  
6 us, we found was basically asking the question of: what is  
7 the worst fire hazard for a facility?

8 Some of the facilities we have come in contact  
9 with, chemical plants, large refineries, various sources  
10 which have had a large array of chemicals and/or fuels in a  
11 large number of various designed containers. Our answer,  
12 which we found, was you basically had to ask: what is the  
13 most flammable material present on that installation? What  
14 is the largest container containing a dangerously flammable  
15 material on that installation, and finally, what is the  
16 nearest container to your proposed housing site?

17 The largest safety separation distance which would  
18 be calculated with respect to that specific facility  
19 ultimately came from one of those three which had previously  
20 asked the questions, and this was the one which would be  
21 employed with respect to the whole facility, for that site  
22 or that project which was being evaluated as to its  
23 suitability for housing or community development or what  
24 have you.

25 Our search through records for data and

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kapHEE 1 information pertinent to aid us in this -- we have found  
2 that there is almost no information which is directly  
3 applicable. We had to take into account a worst fire  
4 hazard, and nobody really asked people the question of where  
5 they were standing whenever they received, like, a second  
6 degree skin burn from an incident, or how many buildings  
7 were involved, radius-wise, from the source of the fire.

8 So we were immediately faced with a limitation, a  
9 state of the art limitation on the amount of data that we  
10 had.

11 We found we also had to take into account additive  
12 factors, namely, what conditions, particularly with regard  
13 to weather or just the human situation, might be additive,  
14 might make a disasterous incident even worse yet --  
15 environmentally speaking, a worst case condition. Such  
16 additive factors with regard to fire would be high wind  
17 conditions, prolonged drought conditions and a delayed  
18 response by the community or the local fire department to  
19 enact safety measures and appropriate protective measures.

20 Interestingly enough, we did identify one actual  
21 occurrence of such an event. It occurred in Chelsea,  
22 Massachusetts, where approximately one-quarter to one-third  
23 of the entire urban community burned down and the same  
24 hazard scenario, interestingly enough, repeated itself  
25 within a 70-year time span, namely, an industrial source,

kapHEE 1 actually a rag shop, caught fire during high gusting wind  
2 conditions. The community, used to fires in the industrial  
3 sector, attempted a delayed response. The water conditions  
4 or the fire-fighting resources were at a low ebb because of  
5 prolonged drought conditions and the same script repeated  
6 itself, I think in 1908 and again in 1973.

7 The third incident which hit the community  
8 occurred one year later, in 1974. So what we have found is,  
9 in attempting risk assessment or hazard analysis on these  
10 type of disasters, you have to be confronted with a very  
11 large absence of pertinent data that you might want. And we  
12 have had to go the route of research to answer a lot of the  
13 questions which we have had pressing us.

14 We have had very little tangible that has come  
15 forward and we have tried to expose our problem and our need  
16 for information in as many different directions as we could  
17 go. This has been educational not only in the aspect of us  
18 to the public, but in many cases of ourselves in attempting  
19 to refine hazard analysis.

20 With respect to explosion analysis, our approach  
21 was the same. What is the worst case hazard? Are there any  
22 additive factors which might make that a worst worst  
23 condition? And I think the most spectacular explosion,  
24 short of a nuclear weapon, is the BLEVE, the Boiling Liquid  
25 Expanding Vapor Explosion. Most people think of the incident



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1 which occurred in Crescent City, Illinois. If you are  
 2 familiar with the National Safety Transportation Board, they  
 3 have some spectacular photos of a fireball which is coming  
 4 close to engulfing a small midwestern community, and it  
 5 involved a relatively small container, 30,000-gallon liquid  
 6 propane tanker.

7 The spectacular point about it was it is one of  
 8 the only photos available of its kind. The photographer  
 9 happened to be right there at the right instant, and he said  
 10 that he had terrific problems trying to hold down the light  
 11 exposure in order that he wouldn't lose the photograph.

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1           These two hazards, thermal radiation and blast  
2 overpressure, we treat in our proposed regulation. Now, we  
3 say blast overpressure because we do not get into fragmenta-  
4 tion or missile effects, which we have become aware are  
5 associated with catastrophic explosions of fuel or chemical  
6 facilities.

7           These, the statistical probabilities that would be  
8 associated with trying to pin down acceptable risk and an  
9 appropriate safety separation distance, are literally too  
10 large to try and encompass with information as it exists right  
11 now or as we are aware of it right now. I can give you one  
12 example later of such an improbable incident.

13           The third hazard which we have chosen not to treat  
14 at this time, but to subject to future research, is that of  
15 toxic substances. Many of these have hit the headlines from  
16 time to time in the newspapers and usually involve mobile  
17 sources.

18           Now, once again, this has brought us to an interest-  
19 ing dilemma. By the nature of our responsibilities, we are  
20 treating stationary sources only. This is as opposed to  
21 most of what you hear, involving a railroad tank car or a  
22 truck tanker. These are the purview of the Department of  
23 Transportation, and as such we are limited in what standards  
24 we can apply to railroad rolling stock or truck traffic.

25           The policy limitation which would hit us were we

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1 to treat mobile sources would be that we would have to restrict  
2 or apply safety separation distances and restrict housing from  
3 major highways and the rail lines, which have a large occur-  
4 rence of chemical tanker traffic.

5 Toxic substances. These we have found are asso-  
6 ciated with a large number of elements of uncertainty: wind  
7 direction, wind speed, surface wind flow, like valley wind  
8 flow, atmospheric stability, and just the question of an  
9 acute toxic limit of threshold brings into play all sorts of  
10 questions about exotic research regarding human health effects,  
11 what would be a safe dosage for a sudden, intense burst of a  
12 chlorine gas cloud or an ammonia gas cloud. That in itself  
13 would be a fertile field for research.

14 We have found two limits or two constraints, even  
15 attempting to refine ourselves to the more concrete aspects  
16 of the problem, basically fire and blast. One is the  
17 flashback, where you have a flammable vapor cloud; and the  
18 other is combustion products. Here what I'm talking about,  
19 if you had a chemical container, like perhaps vinyl chloride,  
20 which became involved in a fire, one of the considerations  
21 would be that vinyl chloride is considered a hazardous vapor.  
22 And yet, a combustion product, if you submit vinyl chloride  
23 to fire, is phosgene, which is a military poison gas and  
24 something altogether different, as opposed to defining a safe  
25 exposure level or an acceptable risk.

1           As I say, we have only had about five years experience  
2 at this. We are right willing to admit we are still learning  
3 the trade, if you will. The more we compare notes with other  
4 people, the more we attempt to educate the public as to differ-  
5 ent aspects of the hazard, the more we become aware of certain  
6 factors that we have to consider and certain elements which  
7 have to be incorporated in any risk assessment technique.

8           Our other areas of interest have included the  
9 formation of an environmental hazards task force at the  
10 secretarial level, which is attempting to address these issues  
11 at a policy level for our department; chemical landfills as  
12 a separate issue, and this being necessitated by the results  
13 coming out of the Love Canal incident; radiation, namely  
14 indoor exposure to radiation over reclaimed phosphate areas,  
15 and radiation exposure due to either mining tailings or  
16 radioactive impurities in construction materials.

17           All these have been hazardous aspects that we have  
18 had to address or we have found a need to address in terms  
19 of community safety and public housing. The constraints that  
20 we now have have either surfaced as a result of people calling  
21 to attention various cases and asking for an analysis from  
22 our field offices or from our assembling of a case history  
23 file of incidents.

24           And one that struck me as intriguing relates to the  
25 question about why we are treating blast overpressure and

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1 yet ignoring considerations about fragmentation or missile  
2 effects. This involved an incident of a refueling facility  
3 in Port Newark, New Jersey, and one of the results was that  
4 a section of a propane tank was propelled into the air as it  
5 ruptured from a series of explosions at the facility, and  
6 upon returning to earth it penetrated the ground and ruptured  
7 the underground water main which was supplying water for the  
8 fire fighters who were fighting that particular fire.

9 So an assumption that we might have made as to the  
10 duration of such a fire at a certain facility would have been  
11 shot to pieces by such an unusual occurrence such as this.

12 As I say, we've only been at it five years and we're  
13 still learning the trade ourselves.

14 Thank you.

15 DR. OKRENT: Dr. Lave?

16 DR. LAVE: I'm curious about two things. First of  
17 all, how is it that you protect severely handicapped people  
18 in the event of a fire, especially if it's a multi-story  
19 building and you're not on the bottom floor?

20 MR. MC GEE: We have had a case occurrence in  
21 Pennsylvania where they asked for an addition to an existing  
22 elderly facility. The hazard was two propane tanks which  
23 were located about 50 feet away. The community was totally  
24 in support of the project. And our answer, once somebody  
25 arrived on the scene and negotiated with the officials

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1 concerned, we took advantage of natural shielding of the land  
2 and we specifically asked that a blast wall be put into the  
3 interim space between the wing which was to be added and the  
4 propane tanks.

5           The thermal radiation portion of the threat to the  
6 elderly residents, we asked for optical shielding. They were  
7 going to put porches on the one side of the building. We  
8 haven't got the design parameters, because our limitation  
9 there is we're in the Office of Environmental Quality, so we  
10 have to interact with the architectural and design standards  
11 in housing within our own establishment.

12           We are in the process of negotiating such considera-  
13 tions.

14           DR. LAVE: Is it fair to interpret your answer that  
15 your answer is you don't expose them to the risk, and that's  
16 your way of protecting them?

17           MR. MC GEE: We try not to, yes, sir.

18           MR. LAVE: A second question is why is it that you're  
19 using the maximum credible accident, somehow defined, as a  
20 design criteria? Here I would have thought that there is no  
21 justification for doing that, that you would want to design  
22 for the expected event and not the maximum credible event.

23           MR. MC GEE: This came out of our research work with  
24 the consultant firm. For me to go beyond that, I would be  
25 speculating.

1 DR. LAVE: Okay. Then let me just say that I think  
2 there is absolutely not justification for using that criteria,  
3 rather than using the entire distribution and trying to take  
4 a look at some sort of average risk, particularly where you're  
5 talking about cases of a small number of people being killed  
6 as a result of the maximum credible accident. I just don't  
7 see any reason whatsoever to use that. And the short-term  
8 consequences of using that are to overdesign structures, so  
9 that you have less adequate, less available public housing  
10 for people who need it, and therefore they suffer from having  
11 not as much housing as they need.

12 MR. MC GEE: Well, we have also tried to come to  
13 grips with the problem that the facility or the installation  
14 may grow at some future point in time. If I may, there seems  
15 to be two or three practical limitations which we have to  
16 consider, simply because of the current need for housing in the  
17 country, and the current need for more and more fuels being  
18 conveniently stored for energy reasons, and more and more  
19 chemicals being utilized by a fairly large number of industries.

20 If we were to assume this is the boundary between,  
21 let's say, an industrially zoned property with some need for  
22 hazardous materials, and our proposed project site, when we  
23 review the project we can't make things retroactive to things  
24 in the past, nor can we treat any change which might occur  
25 in the future.

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1           So if some facility had a large container here, then  
2 our assessment, our distance which might be calculated -- we  
3 realize that the developers are prone to walk the fine line.  
4 If you tell them 999 feet away you may build structures and  
5 you can build those structures, ten structures to an acre, they  
6 will go 999 feet and build 10 or 10.1 to an acre, if they can  
7 do so.

8           The question was asked of us, instead of fuel A,  
9 some time in the future fuel B is put into this container,  
10 the implication being that fuel B carries a much larger  
11 separation distance than fuel A; what to do then?

12           Another point was, suppose a container at some point  
13 in the future is put in on the industrial property, carrying  
14 the same chemical or fuel in this container as was in this  
15 present container, the same separation distance. The population  
16 here would now be in jeopardy. Once again, we have no control  
17 in practical terms over such occurrences.

18           And it was also pointed out that community facilities  
19 being as they are, even though the separation distance might  
20 be here, the children of that community might just elect to  
21 play right here, in which case the safety design measure that  
22 we were trying to achieve would be totally aborted if an  
23 incident were to occur.

24           So we recognized some elements that, however well  
25 intended the policy might be, were just simply out of purview.

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1 DR. LAVE: But I don't understand what conclusion  
2 you draw from that. You know, it's sort of like saying, if  
3 my grandfather -- my grandmother had wheels, she would be a  
4 trolleycar. If somebody were dumb enough to put a facility,  
5 a storage tank, right next to where your property was before,  
6 then there's no design criteria you could have used which would  
7 have protected you.

8 What else do you say after having said that?

9 MR. MC GEE: Well, all I'm trying to do there was  
10 to reconcile the maximum credible, as opposed to an average,  
11 occurrence, if you will.

12 MR. RICHARDSON: Jim Richardson, NRC.

13 There are certainly some societal benefits to be  
14 gained occasionally by taking a certain amount of risk. Has  
15 the HUD arrived at an agency policy on acceptable risk, what  
16 level of risk is acceptable to the public?

17 MR. MC GEE: Not at this time.

18 MR. RICHARDSON: Is there a goal to establish any  
19 such standard?

20 MR. MC GEE: We are looking to interacting with  
21 other agencies to try to define such, or to achieve something  
22 consistent with what other agencies may be arriving at on the  
23 basis of their research. But not at this time; there is nothing  
24 in existence. And we have this not as a specific goal, but as  
25 a general principle.

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1 DR. OKRENT: Dr. Castenberg?

2 DR. CASTENBERG: I thought you said at the beginning  
3 of your talk that you were surprised that local communities,  
4 local regions, had not developed criteria of their own?

5 MR. MC GEE: We found no uniformity.

6 DR. CASTENBERG: Have you thought at all about  
7 withholding a project until that local government or local  
8 agency came up with some acceptable standards that they  
9 developed as a community, rather than you developing the  
10 criteria here in Washington?

11 MR. MC GEE: This again would have been before I  
12 joined the Department, and I can't really say what concerns  
13 were existing at the time of the research contract. Our  
14 experience started in hazard analysis and risk assessment  
15 after the research contract was turned back to us by the  
16 consultant, which was five years ago. So this would have been  
17 approximately seven or eight years ago.

18 I don't know, to be precise.

19 DR. OKRENT: With regard to the question by  
20 Mr. Richardson, a housing development poses other kinds of  
21 risks to its inhabitants besides those that arise from the  
22 storage of chemicals nearby. There can be fires that arise  
23 inside the building, crime inside the building. Earthquakes  
24 can cause damage to the building. And I'm sure we can think  
25 of one or two more.

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1           Is there some effort to look to see whether there  
2 are important, let's say, gains in safety that could be made  
3 in many of these areas; how the risk from such things would  
4 compare to the kinds of things you have been talking about;  
5 whether there is a more effective way to spend the money at  
6 some point; and also, what constitutes an acceptable level of  
7 risk in regard to things of this sort?

8           I have to assume if you spent more money in a  
9 housing development, you could improve its fire resistance  
10 against internally caused fires, and possibly reduce the  
11 incidence of crime which threatens one's personal life, not  
12 only his property.

13           MR. MC GEE: We are assessing other environmental  
14 hazards, things like what is an acceptable level of air  
15 pollution, what is the effect of noise on a community or the  
16 wellbeing of the community, what are the effects of ground  
17 water contamination on a community, particularly communities  
18 out West where ground water as a source may be important for  
19 their livelihood.

20           We are addressing socioeconomic factors in appropriate  
21 lighting, whether people may get hurt from the lack of such;  
22 traffic accessibility. There is an effort being made to  
23 address all environmental hazards, whether they be physical  
24 environmental hazards or socioeconomic hazards, by the  
25 Department before each and every project is funded. We had

1 some involvement in the Love Canal incident. Some properties  
2 were inherited back by the Department. Fortunately, someone  
3 told me that the person looking over the project application  
4 of Love Canal remembered that somewhere there had been a  
5 chemical facility, and they had disposed of some sort of  
6 chemicals way back when. And so he wrote in a precautionary  
7 statement in the projects being applied for that the  
8 Department should not consider anything except those homes  
9 which were sited on original land, i.e., no landfill type of  
10 sites.

11 And that thing in itself, I expect, saved the  
12 Department a good deal of embarrassment when Love Canal did  
13 surface when it did. And this was well before there was any  
14 such thing as environmental assessment or many of the terms  
15 that we have today.

16 We don't have risk assessment in precise quantitative  
17 terms. In the absence thereof, we tend to approach it as close  
18 as we can to zero risk, the standpoint being, if there is a  
19 potential danger there, then it becomes a question of when  
20 this hazard actually will occur, as opposed to if it will  
21 occur.

22 DR. OKRENT: Dr. Shinozuka?

23 DR. SHINOZUKA: The fact that you intend to provide  
24 the people with zero risk, isn't that the basis for your  
25 choosing maximum credible situations?

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1 MR. MC GEE: In part, sir, in very large part.

2 DR. OKRENT: But isn't it a fiction that you are  
3 providing zero risk, since there are these other risks which  
4 in fact may be fairly substantial? You're trying to make it,  
5 I will call it, zero for purposes of discussion with regard  
6 to one specific area, let's say the storage of hazardous  
7 chemicals in the vicinity. But it is not a general goal that  
8 you are trying to achieve for all aspects.

9 MR. MC GEE: One constraint that we realized with  
10 regard to blast overpressure is in the standard as specified  
11 by the research consultant for what money that was available  
12 at that time. There is some probability that someone could,  
13 after all, be standing in front of a window, and although  
14 the building itself might be secure from the blast wave  
15 incident upon it, that person could just happen to be standing  
16 there looking out of the window when such a blast would occur,  
17 would most assuredly some adverse health effects.

18 Trying to pin precise numbers on what is the  
19 possibility of a person being impacted by shattered glass  
20 from an explosion which is, according to the industry, fairly  
21 negligible to start with, is very time-consuming to consultant  
22 and research firms, and very expensive and very iffy to pin  
23 down; and kind of like the example of what is the probability  
24 that a large section of propane tank will take out the water  
25 main which is being utilized to fight the fire.

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1           There are too many "if's" in the problem, I guess,  
2 is what I'm saying.

3           DR. OKRENT: Well, we are a few minutes behind the  
4 agenda. Thank you very much for an interesting discussion.  
5 It is my first knowledge of some of the cases you mentioned,  
6 although I was aware that HUD had some kind of program of  
7 this sort.

8           I'm going to propose that we break for lunch and  
9 reconvene, according to the agenda, at 1:30.

10           (Whereupon, at 12:35 p.m., the meeting was recessed,  
11 to reconvene at 1:30 p.m. the same day.)

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## 1 AFTERNOON SESSION

2 (1:35 p.m.)

3 DR. OKRENT: We are going to have a shift in the  
4 printed agenda and the next speaker will be Mr. Snyder from  
5 American Nuclear Insurers.

6 MR. SNYDER: Thank you, Mr. Chairman.

7 My name is Phil Snyder. I am here -- I don't know  
8 if I can say representing the insurance industry, because that  
9 is a rather broad term to say anyone is representing. But by  
10 my experience in that area is why I'm here. I am a professional  
11 engineer, started life as a chemist, spent eight years with  
12 Reynold's Aluminum doing chemical and metallurgical research,  
13 and then out of that, for some strange reason that I've never  
14 quite figured out, I ended up in the insurance field and have  
15 been working there for the last ten years, doing exactly what  
16 we are discussing here today, and that is, assess risks,  
17 translate these things to underwriters so they can make  
18 financial decisions, and work with the reduction of risks.

19 Now, the topic, of course, is use of risk assessment  
20 methodology, goals, and the criteria used by the insurance  
21 company. The initial draft that my boss wouldn't allow, I  
22 just said, well, we don't use any, and said that was simple,  
23 which isn't quite true. And he pointed out to me all the  
24 shortcomings in my statement.

25 We do not as an industry sit down and perform

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1 esoteric mathematical studies of the risk, such as some of  
2 the things we have heard -- dam failure, aircraft crash,  
3 specific seismic probabilities at a specific location. But  
4 we do use historical facts concerning many events, and we use  
5 a branch of science called actuarial science, which is a little  
6 bit of mathematics and a little bit of waving a magic wand  
7 over a black pot, and put this result into our business.

8           Now, before we get too far along, I need to give  
9 you some brief idea of what insurance is. Insurance is not  
10 gambling. We don't sit down and play a poker game and shoot  
11 craps. Insurance is the transference of risk. The risk has  
12 to be known, identifiable, and already existing, before we in  
13 the insurance business can, for a financial fee, accept this  
14 risk, to take it off of someone else's shoulders.

15           In a poker game, two people sit down and actually  
16 create risk out of nothing, and that is a difference. And if  
17 you have something that is speculative or is in fact gambling,  
18 you'll find you cannot buy insurance on the outcome.

19           Now, back to this risk assessment. The simple way,  
20 of course, is for the people who are like Travellers', Mutual,  
21 Liberty, somebody that's in the homeowner's insurance, because  
22 they have got just the ideal situation. They are writing  
23 single family dwellings all across the United States, and you  
24 find that these are very easily categorized into similar  
25 things.



1           Almost all of them, without doubt, have bathrooms,  
2           kitchens, bedrooms, living areas. A certain percentage have  
3           garages. There are only certain broad categories of construc-  
4           tion. You have frame, you have masonry, you have masonry  
5           veneer, and so forth.

6           Values also tend to lump together. You will find  
7           that probably 99-1/2 percent of these will fit between  
8           \$30,000 and \$200,000 in value.

9           So you have a tremendous, broad, and relatively  
10          homogeneous population, and the actuaries can sit down with  
11          these numbers and they can predict, at least on a nationwide  
12          basis, right down to the seventh and eighth decimal place  
13          what the loss experience in residences will be for the coming  
14          year.

15          And the statistical base is so large that, say,  
16          something like the conflagration in San Francisco after the  
17          earthquake, which destroyed a very large segment of the city,  
18          that doesn't affect the statistics at all. That is just way  
19          down in the sixth and seventh decimal place.

20          Now, that is fine and dandy for us. Unfortunately,  
21          in the business I'm in, American Nuclear Insurers, policy-  
22          writers on such places as Three Mile Island, we are not  
23          working with a broad base of small-valued homogeneous items.  
24          We have specific large-value nuclear power plants, fuel  
25          fabricating facilities, research institutions, and so forth

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1 around the country.

2 And for those of you that do play with statistics  
3 on occasion, there is nothing worse than the guy come running  
4 in and say: Look at here, we've got a population of three and  
5 an experience of X; now what's the frequency going to be over  
6 the next ten years? Then he doesn't like the answer he gets.

7 So what do we do at American Nuclear Insurers, at  
8 other insurance companies in this type business? I mean, let's  
9 face it, General Motors has insurance, Ford Motor Company,  
10 say Celanese Chemical, large papermills. They all carry  
11 insurance. They're industries. Say U.S. Steel; you don't have  
12 a large, homogeneous population of steel mills, either.

13 And the things you do statistically just don't apply.  
14 Yet we can profitably assess these risks and provide insurance  
15 for this type facility. And the way we do it is to sit down  
16 and hire a good engineering staff, which operates at many  
17 levels.

18 You start out with actually having engineers in the  
19 field. Usually these are fairly young people. Most of them  
20 are either fresh out of college or -- often we find that they  
21 are just either retired or have come off a hitch of, say, Navy  
22 duty. In mechanical areas, a machinist's mate makes a good  
23 starting point for certain types of engineering inspections.  
24 These report to supervisors with more experience and training,  
25 and right on up the line.

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1           And pretty soon in any industry, be it automotive,  
2 steel, heavy chemical, primary metals production, you have  
3 a large body of experience of looking in detail at very  
4 small, discrete things, which funnels in like tributaries into  
5 a river. Finally, somewhere at the top, you can make industry-  
6 wide assessments for broad rating purposes, and you can make,  
7 to some degree, pretty good individual facility assessments  
8 that this place is going to blow up or it's not, or it is a  
9 good risk or it's not.

10           Let's get back to some of this. And I will do a  
11 little horn-tooting specifically in nuclear power plants.  
12 There is no experience. The first one didn't go into  
13 commercial operation until either the late 50s or early 60s.  
14 I forget when Dresden started up. We haven't had, thank  
15 goodness, a large history of big accidents to play with. So  
16 statistically we just have a broad range of confidence.

17           But what we in the insurance area find is two things:  
18 One, in any industry, in any area of insurable loss, even the  
19 homeowners, it is not the big total 100 percent loss of some-  
20 thing that we look at, that costs us the most money and so  
21 forth. It is the incremental loss. It is when you burn out  
22 your kitchen because the grease caught the curtains on fire.  
23 That is not the total value of the dwelling. There are very  
24 few of those in the country each year. But you have an  
25 entirely different situation when you look at how many kitchen

1 fires were there. And these, of course, are less than the  
2 policy value.

3 We carry the same thing in nuclear power plants.  
4 You find you have turbines, valves, motors, pipes, structures,  
5 electrical circuitry, control boards, pressure vessels, piping.  
6 And we, at least, say to some extent that the pipe carrying  
7 steam is a pipe carrying steam. An instrument cable is an  
8 instrument cable, whether it happens to be sensing the  
9 temperature of molten metal in a steel mill or whether it  
10 happens to be carrying a signal for a containment pressure  
11 sensor.

12 And we look then at this. It is an instrument cable.  
13 In the case of fire protection, which is my area of greatest  
14 experience, we know that cables burn. And the insurance  
15 industry knows that cables burn. In fact, in 1956 -- not '66  
16 or '76, but in '56 -- the Factory Insurance Association, which  
17 is now called the Industrial Risk Insurers, published a book  
18 which covered cable fires, switch gear installation and  
19 proper installation and protection to prevent this.

20 Now, in the nuclear industry we sometimes tend to  
21 reinvent the wheel and things that may happen in a steel mill  
22 or a paper mill obviously can happen to us, and we sit down  
23 and write new regulations in a vaccum and they get enforced.  
24 Bright young design engineers sit down and design things out  
25 of existence.

1           At this point, as I usually do some place in every  
2 one of my talks, I will throw out Snyder's law again. Number  
3 one, it is that everything that can burn, will. Number two  
4 is, ignition sources are free. And, number three, Murphy was  
5 an optimist.

6           And the insurance organizations around the world  
7 that participate in writing nuclear facilities -- and this is  
8 a great, tightly knit fraternity that brings all of the  
9 insurance money available together, so that the plants in the  
10 United States, the plants in Germany, the plants in England,  
11 Switzerland, Sweden, are afforded the maximum insurance  
12 coverage that they can get.

13           We participate in all of them in the free world.  
14 But they look--the insurance business' greatest experience  
15 in large facilities is with fire insurance. They look at  
16 the nuclear industry worldwide. They determined that the risk  
17 from a large fire was too great. So, starting in 1972, there  
18 were several international meetings which resulted in the  
19 publication of international guidelines for fire protection  
20 in nuclear power plants.

21           This was issued prior to the Brown's Ferry fire, and  
22 we like to toot our horn again and say, if Brown's Ferry had  
23 been constructed and operated in accordance with those  
24 guidelines, they would not have had their disastrous fire.

25           We didn't insure Brown's Ferry and we didn't expect

1 Brown's Ferry. But I will go so far as to say that if we had,  
2 we would have prevented it, because you just never know.  
3 Again, Murphy was an optimist.

4           There are lots of other cases where our practices  
5 in the insurance industry for reducing risk, at least to our  
6 dollars and the policyholder dollars, just doesn't quite track  
7 with the regulatory atmosphere we see today. Piping is a  
8 good example.

9           We know that you have pipes in paper mills, chemical  
10 plants, fossil-fired coal plants. You name it, everything has  
11 got pipes. You pipe water, steam, what have you. We also  
12 know that these things are subject to failure. There are  
13 quite a few piping failures throughout the country each year.  
14 And our way to ensure the least risk to us is to insist on  
15 full compliance with the ASME Boiler and Pressure Vessel Code,  
16 and that goes for the design, the construction, and the  
17 maintenance and testing.

18           And if you closely read the federal regulations in  
19 this area in the nuclear business, you will find only equiva-  
20 lency is required. And we sit back and say: Well, we don't  
21 know what equivalent is. We don't have the staffs available  
22 to decree or study that something is equivalent. So we just  
23 fall back and say: Fine, you meet the ASME Code. When you  
24 have the certified stamp by all the authorized inspectors and  
25 the operating certificates are in line, we will insure it.

1           Of course, next year, when it's time to test it, you  
2 have to keep that up, too.

3           Now, back to the actual, I guess more in-depth of  
4 risk analysis. As I said, we don't really do a rigorous  
5 mathematical analysis of our risks, except in those areas that  
6 are subject to good statistical work, such as homeowners  
7 insurance, life insurance, where the risk is of early death  
8 and you have a tremendous population to calculate for.

9           When you write a billion dollar chemical facility  
10 and you are writing a policy that covers not only the actual  
11 physical value of property at that location, but also the  
12 continued operation of it, which we call business interruption  
13 insurance -- and say, a large refinery could purchase a policy  
14 that, in the event of loss by fire, storm, explosion, lightning,  
15 whatever, it is covered; that the insurance company will pay  
16 for their loss of profits until that production is restored.

17           And if you look at the production values of some  
18 of the refineries and chemical plants these days, you defi-  
19 nitely get the attention of the underwriters, who immediately  
20 come over to the engineers and say: Hey, what's going on?  
21 Can I write this? Is it going to blow up tomorrow? And we  
22 always very carefully weasel it around and say: No, it is  
23 not likely to.

24           But he is the guy that signs the policy, but he  
25 always has a memo from the engineering side that told him it

1 was okay.

2 But we divide our loss studies in this high-risk,  
3 high-severity, low-frequency situation, into sort of three  
4 levels. We have what is called a probable loss. This is the  
5 case where, back to Snyder's law, where it says ignition  
6 sources are free. We assume some accident occurs. But then  
7 we assume a reasonably adequate performance by the plant  
8 personnel, by designed-in, built-in safety features and so  
9 forth. These are your normal, nonconsequential industrial  
10 accidents: a gas pipe fitting, a furnace breaks, the low  
11 pressure sensor senses this and the valve goes shut. That is  
12 an accident. Everything works like it should. And away we go.

13 We basically don't insure these. These are handled  
14 by policy deductibles. We sort of consider them just normal  
15 occurrences.

16 The second level we look at we call a maximum  
17 probable loss, which goes a little further and assumes some  
18 adverse performance, either in the case of the operators or  
19 on installed safety equipment or other such things. The  
20 Brown's Ferry fire and the TMI incident we put in this category  
21 of maximum probable loss.

22 And since we are in high limit, infrequent but  
23 high severity incidents, we have a third category which we  
24 call maximum catastrophic loss, which anticipates a serious  
25 failure of equipment and adverse performance of personnel.



1 And we also anticipate that the loss will progress beyond  
2 those areas where you would normally expect it to bound itself  
3 by some passive means.

4 To get these concepts across, we usually use the  
5 example of a turbine. In the first case, that is a probable  
6 loss, we would assume that the turbine froze a blade, and this  
7 is held within the casing. The vibration sensors which they  
8 have sense the imbalance and the machine is safely shut down.  
9 As I said, we have deductibles and exclusions for that type  
10 thing. It is a normal operating occurrence. There is no  
11 problem and no insurance collection by the client.

12 At the second level -- in fact, we actually study  
13 things like this to get estimates of the dollars involved.--  
14 we would make the assumption that this blade or several blades  
15 actually penetrate the casing, do it in the worst possible  
16 area, sever a lube oil line, and a fire starts. But to fit  
17 in this category, we would then assume that the operators  
18 took the correct actions to begin bringing the turbine down  
19 to standstill, lubrication was maintained, and the fire  
20 protection systems did activate and control the fire. These  
21 are the type things that start getting headlines to be  
22 written up in the paper. If it is a nuclear plant, it will  
23 make national news.

24 The third case, though, we also look at -- and  
25 very few people seem to go that far -- as we assume, without

1 attaching any probabilities yet, that everything that we have  
2 talked about before happens. The blade goes up. It ruptures  
3 the oil line and the fire starts. But in this case the fire,  
4 we would say, might progress such as it burns out the wiring  
5 which powers the lubrication oil pump for the turbine.

6 We heard about the propane tank breaking the water  
7 main. We could make some assumption that the fire protection  
8 system was impaired for one reason or another. The turbine  
9 is sitting there burning, attempting to coast down without  
10 lubrication. We seize a shaft, break the unit in two or  
11 three pieces. The missiles progress out in sort of predictable  
12 paths, hit a transformer in the switchyard, and that causes  
13 an electrical failure here, there, and yonder.

14 And these things do happen, fortunately not very  
15 frequently, and we do look at them. And a fair amount of our  
16 engineering work is in trying to prevent this, such as reloca-  
17 tion of equipment, redundant lubrication systems, protective  
18 control wiring, this type of thing.

19 We use, as I previously mentioned, a large staff --  
20 "we" means the industry -- a well-trained and experienced  
21 inspectors and engineers, and we inspect. And we consider  
22 there's a big difference between inspect and audit. We  
23 inspect all of the facilities which we insure on a rather  
24 detailed basis.

25 In just the mechanical equipment area, our inspectors

1 will average about 45 days per year per unit in a nuclear  
 2 power plant. In doing this, he is physically checking motors,  
 3 valves, piping, hangers, you name it, for their degree, how  
 4 well are they maintained. He spends very little time,  
 5 relatively speaking, reviewing compliance with maintenance  
 6 criteria. Instead, he goes down and looks at the pump, or  
 7 he looks at the motor.

8           And it is surprising how many times we will get a  
 9 report in that the motor is fine, the pump is fine, but it's  
 10 got no lubrication oil in it. And when we check, we find  
 11 that the documentation is sufficient to show that this is  
 12 properly maintained, but the end result doesn't agree with  
 13 that.

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1 We use these engineers, and we use them  
2 subjectively and objectively. The subjective area is, in my  
3 opinion, the most important, and this is their personal  
4 opinion of the plant management, and these come from various  
5 different types of inspectors.

6 We have inspectors that are experienced in the  
7 fire Protection areas. One of the first things we ask of  
8 these inspectors is, what is your opinion of the management?  
9 Are they cooperative, and on and on and on? We send in  
10 mechanical equipment inspectors. We ask them the same  
11 question: What is your opinion of the management? Is it  
12 good?

13 We will send in nuclear specialists, and this is  
14 where we, of course, get into most of the auditing  
15 procedures. But still one of the first questions we ask  
16 them is: What is your, Mr. Inspector, your personal opinion  
17 of management? And this subjective opinion, we feel, is the  
18 most important item in assessing the risk at a particular  
19 facility. And although it may be extremely difficult and  
20 impossible to quantify, it is our feeling that if you have  
21 poor management, you have a definite increase in risk.

22 The next areas we look at, of course, get into the  
23 objective area where you can define and quantify such as we  
24 look at specific plant protection. Does it mean the  
25 appropriate building codes? Does it comply with the

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mgcHEE 1 appropriate ASME codes? How many fire protection systems  
2 are there? Of what quality are they? Are they build in  
3 accordance with the applicable codes? What are your actual  
4 demonstrated results of maintenance procedures? What type  
5 of protection do you have against flood, tornado,  
6 earthquake, lightning, and so forth? These, we look at and  
7 can verify and do use in actually developing insurance rates  
8 and so forth.

9 A third gross overall area that we look at is in  
10 that area of specific hazards, such as rad waste handling  
11 systems. You've got liquid, solid, gaseous, and so forth.  
12 There are all sorts of ways to compress, compact,  
13 concentrate, transport — you name it. We insure the  
14 results of this, either if the equipment breaks or the  
15 resultant contamination, so we have specialists who look at  
16 these specific hazards.

17 For instance, if you are concentrating waste and  
18 using a medium that has known hazards of combustibility, we  
19 look at how is this combustible medium handled? Is it  
20 safely stored? Are the purchase orders written in such a  
21 manner that if you think your order of methyl-ethyl ketone,  
22 you don't get methyl-ethyl ketone peroxide. That's not too  
23 likely to happen anywhere, but it is just an example.

24 For instance, we ask, because of the known hazards  
25 of plastics, that you use certain grades of plastic film for

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1 your covering protector and so forth. At this point, we  
2 have a specialist who's checking to see that they are, in  
3 fact, ordering and are, in fact receiving the appropriate  
4 material.

5 In this area, we issue bulletins. You will  
6 find -- I think we copy the NRC as well, but we have  
7 bulletins ranging from everything from how we want your  
8 cooling towers constructed to proper design for off-gas  
9 systems at BWRs. And we are most of the time proud of the  
10 fact that we don't have to follow these rather slow federal  
11 regulatory processes and can do things in a hurry.

12 Of course, doing them that way, we're not always  
13 right, but at least we do something. As a for instance --  
14 and we can go back to Brown's Ferry again -- at the time of  
15 the Brown's Ferry fire, the nuclear insurance industry had  
16 identified that penetration seals, those cables through far  
17 areas, were a problem and that the combustibility of cables  
18 was a problem area.

19 We had started testing in several areas before the  
20 fire. In fact, our first cable fire tests were run several  
21 months before Brown's Ferry. And after the fire, we were  
22 able to get an area of penetration seals, a full-blown  
23 approval and testing program underway, and by fall -- that  
24 is between the fire being in March and either late September  
25 or early October -- was the first full-scale industry test.

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1 We had our program down, documented the approval  
2 procedures on the way, and industry testing underway. We  
3 continued testing cables, and we issued our own guidelines  
4 for cable construction, cable installation, cable  
5 separation, even though we had a lot of argument with the  
6 IEEE and a few other organizations. And we did that, had  
7 our own guidelines out by early 1976 in a final form, and  
8 unless I have missed something drastic, the federal  
9 government still does not have definitive regulations in  
10 this area. They are still in draft. There are still  
11 hearings going on. And there are only beginning to be  
12 national consensus standards coming out in this area.

13 So we are proud of the fact that we can identify  
14 areas of hazard and areas of risk, and at least for our  
15 purposes of protecting our dollars, move promptly to do  
16 something about it.

17 Now, the purpose of this Subcommittee, as I  
18 understand it -- and I may be wrong -- is to review the NRC  
19 program on quantitative risk criteria and to possibly see if  
20 there are methods, et cetera, that could be used to reduce  
21 the risk to the public. And I say, fine. If we are looking  
22 at a broad population, a statistical probability of  
23 earthquake, that's the only way you can do it -- take a  
24 large population. You know where the faults are. You make  
25 assumptions, and so forth.

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1                   But we are dealing with your licensing. We are  
2 insuring specific nuclear power plants. We don't write an  
3 insurance policy on a nuclear power generating industry of  
4 the United States and have this big, broad, wonderful  
5 average to work with. We write specific facilities, and the  
6 NRC licenses specific facilities, and it doesn't do us or  
7 you too much good to know that some event has an entire  
8 population probability of occurring only once every 10,000  
9 years because no one stops to address the fact that that is  
10 fine, but does it happen to be once in ten years at this  
11 particular location, and once in a million at all the rest?

12                   That's what we have to deal with in the insurance  
13 industry -- is which one is the one that's going to get us,  
14 not what is the industry-wide average. It is sort of a case  
15 of figures don't lie, but liars figure.

16                   If I can offer a suggestion -- and I doubt very  
17 seriously if it can be implemented under the regulator  
18 systems -- but that suggestion is that to reduce individual  
19 risks which will have the net result of reducing overall  
20 risks, you concentrate on the management of the facilities.

21                   And the example I will give of that is the Dupont  
22 Corporation. They have, or they are well recognized at  
23 least in my business of being Mr. Safety -- they don't blow  
24 up plants. They don't burn them down. They don't injure  
25 employees -- anything like the rest of American industry.



mgcHEE 1 Their personnel safety, fire and explosion safety,  
2 transportation safety records are so good that they honestly  
3 cannot afford to purchase insurance because the increased  
4 cost to the corporation would just be prohibitive, because  
5 no insurance company could afford to write those great of  
6 values, even knowing the low risk, for a premium that  
7 anywhere approaches their in-house cost for maintaining and  
8 operating a safety program.

9 And the key to the Dupont program and quite a few  
10 other chemical people in the chemical industry is management  
11 responsibility from the Chairman of the Board to the  
12 President of the company to the individual plant manager.  
13 There is a real, deep belief and dedication to doing it  
14 safely.

15 When a Dupont plant puts up a sign that says,  
16 "Safety first", they really mean it. They don't do it  
17 because the National Safety Council sent them a box of them.  
18 In fact, they take it so seriously that a Dupont plant  
19 manager who has too many accidents at his plant is in  
20 jeopardy of losing his job, even if he happens to be setting  
21 a productivity record for the whole corporation. They will  
22 not tolerate managers who don't run a safe plant.

23 And by having this personal responsibility,  
24 knowing it is my job, we get something done. They believe  
25 in it. The foreman on the line who is supervising the

mgcHEE 1 people, he knows that he will get fired when the plant  
2 manager gets fired. So he is interested in being safe.

3 I think one of the best examples of that in the  
4 federal field and something that the Commission should  
5 definitely look at is the outstanding lack of success of the  
6 OSHA program. This was forced onto American industry as the  
7 great, wonderful thing that will make the workplace safe for  
8 the worker, and if you look at the statistics, there has  
9 been no improvement in accidents whatsoever.

10 The plants that were safe operations before OSHA  
11 are still safe operations. The plants that weren't safe  
12 operations before OSHA still aren't safe operations. And  
13 there again is that management commitment.

14 OSHA requires compliance with regulations, and  
15 there are two ways to comply with regulations. You can go  
16 out and do only what you absolutely have to as a minimum to  
17 meet the letter of the regulations and the auditor checks  
18 you off, or you can really want a safe operation -- find out  
19 what the regulation means, where it came from, and go out  
20 and do it on purpose, make it better in some cases.

21 In our own area, you can see this when we  
22 interview and discuss operators. You have operators in  
23 these plants. He's got a license. He's a licensed  
24 operator; he's been through the training program. And there  
25 is one guy -- he wanted to be a plant operator. That was

mgcHEE 1 one of his big goals. He wants to be a good one. He  
2 studies extra time; he goes further than he has to; he  
3 learns what makes a plant tick. He spends time talking to  
4 other people in other departments -- what are you doing --  
5 and he's a darned good operator, and yet he may have had the  
6 same score on the examination as the guy who only did what  
7 he absolutely had to.

8 And I think from your own experience, you will  
9 know that that second guy is a much poorer operator than the  
10 first one I discussed.

11 And with that, I will answer any questions that I  
12 can.

13 DR. LAVE: You made this interesting statement to  
14 begin with that there were small eventualities that wound up  
15 costing money. Is that only because of experience to date,  
16 or do you expect that that will be true in the future? If  
17 so, why do we need Price-Anderson?

18 MR. SNYDER: Well, I heard a similar question  
19 earlier today. We need Price-Anderson because the insurance  
20 industry does not have sufficient assets to provide all the  
21 coverage necessary to the public.

22 DR. LAVE: Come on, now. What kind of accident  
23 are you talking about?

24 MR. SNYDER: Well, what was the release at Three  
25 Mile Island? I mean, offsite it is a minor accident, yet

mgcHEE 1 look at it from the insurance company's standpoint. For the  
2 next 20 years, you're going to be battling lawsuits --  
3 possibly if the court climate is such, paying exorbitant  
4 claims. There is no limit to what the courts may allow in a  
5 very minor accident.

6 So we think -- and we may be wrong, but the  
7 Congress somewhere made the decision that we do need nuclear  
8 power. Someone made the decision that the available private  
9 insurance wasn't enough to give the public a good feeling,  
10 so they added some on top.

11 DR. LAVE: Without getting to that, could I get  
12 back to the first part of my question? I understood you to  
13 say, it is the little things that have cost you money so  
14 far. And let me just ask again, do you expect that will  
15 continue to be true in the future, absent some really  
16 colossal occurrence?

17 MR. SNYDER: Okay. You may have misunderstood  
18 that. You're right. Let's take a hypothetical plant of any  
19 type that is worth \$100 million, and we write an insurance  
20 policy for \$100 million. The probability of paying that  
21 \$100 million is just vanishingly remote. What we pay are  
22 the \$10,000; \$30,000; \$50,000 every month, two months,  
23 three months, type losses. And these add up over the entire  
24 history of an insurance organization to be a much greater  
25 sum than the individual, infrequent, what we call

mgcHEE 1 "shock loss."

2 DR. LAVE: Would that also be true, for example,  
3 for supertankers carrying oil?

4 MR. SNYDER: I don't know. I'm not in the marine  
5 insurance business. But depending upon how the policies  
6 were written, which might cover contamination to cargo, late  
7 delivery, this type thing, it very possibly could. If there  
8 was only a catastrophe policy written that we're only going  
9 to pay you when the thing finally sinks, then, no, that  
10 wouldn't be true.

11 DR. LAVE: That must be just a lovely kind of a  
12 case for an insurance company, if your claims are relatively  
13 small, much less than the face value of the policy -- lots  
14 of little tiny claims instead of a couple of really big  
15 ones.

16 MR. SNYDER: Well, no, it is not, because they  
17 won't buy the insurance if our premiums are exorbitant, so  
18 we have to sort of balance in there, if we are writing a  
19 \$100 million facility, they aren't going to pay \$50 million  
20 a year for insurance.

21 DR. WILSON: But I don't understand that one,  
22 because the premiums that a utility company pays now are  
23 such a small fraction of what the charges appear on my  
24 electricity bill, I mean that it's after all -- the reason  
25 they buy insurance is because they have to. If you multiply

mgcHEE 1 it by ten, it still won't be on my electricity bill.

2 MR. SNYDER: That's true.

3 DR. WILSON: So that answer, I think, is just  
4 wrong. It just can't be right.

5 MR. SNYDER: Let's back up a little. We are in  
6 the free market situation that, with the exception of what  
7 is required by Price-Anderson, the utilities can elect to  
8 buy or not to buy our insurance for damage to their  
9 property.

10 Now because Price-Anderson is mandated by law, and  
11 we are a monopoly, we feel somewhat bound to keep the rates  
12 as low as possible. In fact, if you look at the structure  
13 after ten years, we return all unexpended premiums to the  
14 policyholder. So what the utility paid in ten years ago,  
15 which wasn't used to pay for losses that resulted from  
16 operation during that year, is returned to him this year.

17 DR. OKRENT: Can you say whether you have  
18 differentials in rates for insuring different nuclear power  
19 plant properties because of the management?

20 MR. SNYDER: No, not for management.

21 DR. OKRENT: So all of the managements have turned  
22 out to be the same in your eyes from a dollar protection  
23 point of view?

24 MR. SNYDER: From a legal rating point of view, by  
25 being able to look at lots of things, if we have a plant

mgCHEE 1 that we do feel the management is extremely poor, we can  
2 find enough other things to complain about which are the  
3 result of that poor management to actually get an increase  
4 in rate. But it is not and cannot legally be the cause of  
5 our judgment of their management capabilities. It has to be  
6 based on physically verifiable,  
7 you-guys-don't-maintain-this-and-it-doesn't-work type  
8 situations.

9 So it is the same result.

10 DR. OKRENT: Dr. Castenberg?

11 DR. CASTENBERG: Early in your talk in regard to  
12 fires, you used the phrase: "The risk was too great, and  
13 therefore we went and looked for some guidelines." When you  
14 used the phrase "the risk was too great", was that a  
15 qualitative judgment or a quantitative judgment made -- that  
16 the risk was too great? How did you arrive at that phrase,  
17 or how did you arrive at the decision that the risk was too  
18 great?

19 MR. SNYDER: It is almost like a multiplex. We  
20 talked about rating. Obviously, if we could charge the full  
21 value of the plant, we wouldn't care what the risk was  
22 because we could never pay out more than that for the rates  
23 that we have to charge, and I'm talking general industry  
24 now. They pay maybe an average of six cents per year per  
25 hundred dollars of value of insurance, which is generally

mgcHEE 1 about one tenth of the average homeowner's insurance. So  
2 when we look at a facility and then we find historically  
3 here and there something new is cropping up like  
4 concentrated cable fires, we transpose that to whatever  
5 we're working with, and we say, worldwide we have  
6 experienced a certain number of fires of values, dollar  
7 values at a certain level, can we afford at our present  
8 rates to accept that risk of occurrence in our plants?

9 And when we find that we can't, because we are in  
10 competition with other organizations who aren't going to  
11 raise their rates because we do, we have to improve the  
12 protection and the design.

13 DR. CASTENBERG: So you have some threshold limit  
14 in dollars paid out which is a criterion?

15 MR. SNYDER: Yes, but it is not fixed.

16 DR. CASTENBERG: I see.

17 MR. SNYDER: It floats.

18 DR. OKRENT: Dr. Wilson?

19 DR. WILSON: The thing I'm not clear on, in some  
20 other industries, certainly in for example gasoline tank  
21 trucks and things of that sort, the insurance industry sets  
22 standards. What is it? The Fire Protection Agency in  
23 Boston actually does it, and in fact they have got other  
24 standards for some of the industry even beyond that, and  
25 premiums for insurance are judged by the use of those



mgcHEE 1 standards.

2 So in a certain sense, the insurance industry did  
3 a fair amount of the regulation of the industry through this  
4 practice. Now I don't know of any example in the nuclear  
5 industry. Is there any, for example, example where you  
6 would set higher premiums for Three Mile Island-2 than Three  
7 Mile Island-1 or anything whatsoever in the nuclear industry  
8 where you were setting a criteria and force it on the  
9 industry by adjustment of the premiums? Or is there any  
10 contemplated?

11 MR. SNYDER: Yes. We do that for each individual  
12 facility. I am not an expert in the rating of the public  
13 liability insurance portion, but I know they have a  
14 published schedule that is public knowledge that they use to  
15 assess plants which cover such things as surrounding  
16 population density. And all of these factors go in, and  
17 different plants have different rates.

18 On the property side, the direct physical damage  
19 to the utility company property that I work with, we have a  
20 Rating Bureau which is an independent organization, Nuclear  
21 Insurance Rating Bureau, that sits, I guess, quarterly in  
22 New York City. We have to report to them a certain list of  
23 facts about the individual plants. What is the size? What  
24 is the value? What type of plant is it? Who built it?  
25 Where is it? What kind of public fire department do they

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1 have nearby, and on and on and on? Many reports. And they  
2 establish, based on a lot of things including general  
3 published insurance rates for specific hazards, and they  
4 come out with a rate. And that is what is charged to the  
5 plant.

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kapHEE 1 DR. WILSON: The second part of the question, is  
2 there any feedback, and if I take the Pilgrim plant near  
3 Boston, which happens to be a local one, it is a little  
4 closer to Boston than, for example, Maine Yankee up in the  
5 corner of Maine, and might, by your population density,  
6 therefore satisfy some different criteria. Is there any  
7 known case in a siting decision to a utility company, say,  
8 do they bill Pilgrim-2 or do they bill Maine Yankee 2? Is  
9 there a choice of these things influencing what the industry  
10 actually does?

11 MR. SNYDER: There should be, but the only time  
12 I've ever seen this effect occur is when we negotiated with  
13 the utility and said, what you propose is just not  
14 insurable. There will be no insurance available, period.  
15 Then the listen. Otherwise, as you previously mentioned,  
16 the cost of insurance is such a small part that it is  
17 generally ignored.

18 DR. OKRENT: Thank you, Mr. Snyder. This was an  
19 interesting talk. I appreciate your coming here. I  
20 understand that Mr. Ellett and Mr. Richardson are here now.  
21 So we can revert back to the planned timing, albeit a little  
22 delayed. Let me ask: would it intolerably inconvenience  
23 Dr. Page, for example, if he is 40 minutes behind where he  
24 is currently scheduled? Because we have slipped, is that  
25 tolerable?

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DR. PAGE: That is okay.

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DR. OKRENT: Then I would propose that we hear from either or both Mssrs. Ellett and Richardson from the Environmental Protection Agency.

MR. ELLETT: My understanding, you're going to have other people from the EPA this afternoon -- I think you will see similarities and differences between how each of these offices factor risk analysis into their decision-making process.

The Office of Radiation Programs uses a variety of considerations in setting radiation protection standards and guides. Risk is, of course, only one factor in the decision-making process leading to regulation. I believe you have copies of our policy statement of March 1975. It has been published in the Federal Register and several other places.

I would like to call your attention to the last paragraph in that statement, where it says the linear hypothesis by itself precludes the development of acceptable levels of risk based solely on health considerations. Therefore, in establishing radiation protection positions, the agency will weigh not only the health impact but also social, economic and other considerations associated with the activities addressed.

As is also stated in this policy statement, the

kapHEE 1 Office of Radiation Programs believes it has an obligation  
2 to make available to the public numerical estimates of the  
3 risks to human health from radioactive contaminants. The  
4 agency recognizes that these estimates are not precise and  
5 that they are truly estimates and not predictions of  
6 environmental impacts.

7 While such estimates are an important component of  
8 the standard-setting process, they are not a substitute for  
9 the current federal radiation protection guides, and I would  
10 like to recall the first federal Radiation Protection  
11 Council publication, where injunctions are given that any  
12 radiation exposure must be both useful and necessary in the  
13 first place, before there is any consideration of whether an  
14 allowable risk is all right, an exposure must have an  
15 expected benefit compared to the health risk imposed, and  
16 finally, that all exposures be as low as practicable.

17 Moreover, to quote the Federal Radiation Council  
18 directly, they say there can be no single permissible or  
19 acceptable level of exposure without regard to the reason  
20 for permitting the exposure. I think our office has backed  
21 away from the idea that there is some kind of magic number  
22 applicable to all situations involving radiation exposure.  
23 And I believe this is reflected in the standards we've set.

24 The Office of Radiation Programs has authored  
25 several radiation protection standards and guides. None of

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1 these have identical risk estimates, although in some cases  
2 the estimated risks are not too different.

3           However, the basis for selecting the limits varied  
4 quite strongly from one case to another. Now, one reason  
5 for this is the legislative mandate for various types of  
6 environmental regulations differ greatly depending upon what  
7 is said in the enabling legislation. For example, the Safe  
8 Drinking Water Act of 1974 specifies that the national  
9 interim drinking water regulation shall protect health to  
10 the extent feasible using technology and techniques that are  
11 generally available, taking cost into consideration.

12           In contrast, under the Atomic Energy Act, the  
13 administrator has the authority to establish such standards  
14 as he may deem necessary or desirable to protect health or  
15 minimize danger to life or property. There is no reference  
16 to cost.

17           I would like to outline how the agencies establish  
18 radiation standards under each of these differing  
19 authorities. First, I would like to talk about the Safe  
20 Drinking Water Act. Proposing limits for radioactive  
21 contaminants of drinking water, the agency was faced with  
22 two quite different situations. Man-made radioactivity  
23 usually enters the environment from controllable sources  
24 already subject to a high degree of governmental  
25 regulation. On the other hand, radioactivity is ubiquitous

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1 in ground water throughout the United States. Selecting the  
2 limits for man-made radioactivity correspond to a four  
3 milligram per year dose with an estimated risk of .4 to two  
4 deaths per year for each million persons exposed. That is,  
5 of course, exposed at that maximum limit, and we would  
6 expect most people not to be at the maximum limit.

7 This limit was not selected on the basis of a de  
8 minimus risk, but rather, to quote the Federal Register  
9 notice on these regulations, it was chosen on the basis of  
10 current levels of radioactivity in community water systems  
11 and to avoid undesirable future contamination of public  
12 water supplies. The limit for radium was set at a  
13 concentration corresponding to an intake of 10 picacuries  
14 per day. Estimated risk at this level of radioactivity is  
15 .7 to three deaths per year for each million persons  
16 exposed.

17 Selection of this limit was based on the cost of  
18 obtaining lower concentrations and agency's uncertainty on  
19 the number of community water systems that would be  
20 impacted. It was not selected on the basis that this was an  
21 acceptable or de minimus risk.

22 Indeed, the risk of the drinking water maximum  
23 contaminant limits are probably higher than allowed for any  
24 other drinking water contaminants.

25 Turning to the uranium fuel cycle standard, which

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1 was established under the Atomic Energy Act, a somewhat  
2 different approach was used. The agency examined the cost  
3 of risk prevention for different parts of the uranium fuel  
4 cycle and strove for some comparability in terms of cost per  
5 cancer death averted.

6 Mr. Richardson was very instrumental in developing  
7 the uranium fuel cycle standard and will talk a little bit  
8 more about the detail of how we developed our uranium fuel  
9 cycle limits.

10 MR. RICHARDSON: I would like to apologize for not  
11 having any prepared statement for you. The rationale that  
12 was used for the uranium fuel cycle standards -- I think  
13 it's well known to most of the people here, and it is  
14 documented to the extent that we were able to write it down  
15 in the environmental impact statement that went along with  
16 that standard when it was promulgated a couple of years  
17 ago. And I am sure there are copies of that available.  
18 We're about out, so I didn't bring 20 for everybody.

19 As Dr. Ellett pointed out, the standards for the  
20 uranium fuel cycle had a heavy base in cost as well as risk,  
21 because we are permitted to do that by the Atomic Energy  
22 Act, which doesn't really place any restrictions on the  
23 methodology that you use for setting standards.

24 We looked at, I think for the first time, the  
25 question of long-term risks to large numbers of people

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kapHEE 1 spread over large distances.

2 That is to say we calculated the collective dose  
3 commitments to the world's population in the case of  
4 isotopes like crypton, and those standards reflect the risks  
5 associated with those assessments as well as the risk  
6 associated with doses to people close to facilities. And  
7 that is probably the most significant difference between  
8 previous standards and those standards for the uranium fuel  
9 cycle.

10 The question of deciding at what point you had  
11 spent enough money to avoid risks was a central issue in the  
12 standards, and it wasn't handled very cleanly because you  
13 can't handle that kind of question very cleanly. What we  
14 did was rank all of the major control methods by cost and by  
15 the amount of risk that was avoided through their use. A  
16 cost effectiveness ranking -- and we found that it was  
17 convenient to divide all of those options, each of which had  
18 its own dose level attached to it, into three broad  
19 categories.

20 Quite arbitrarily, those that fell above a half  
21 million dollars or so per life of lethal cancer, those  
22 that fell less than \$100,000 for each of those types of  
23 events, and then of course, a third class, which were those  
24 that fell in between. That ranking implies an evaluation of  
25 life that falls somewhere between \$100,000 and a half

kapHEE 1 million dollars or so.

2 We purposely left it very vague. When we looked  
3 at the options that were available to us for setting  
4 standards based on that kind of a ranking, we discovered  
5 that there were very, very few levels of control that fell  
6 in the third or middle category and it became rather easy to  
7 say, Yes, you should do all those things that cost more than  
8 half a million dollars per life -- or you shouldn't do those  
9 things, excuse me -- and that you obviously should do those  
10 things that were down \$100,000 or less, because those value  
11 judgments were, it appeared to us, generally acceptable  
12 areas where there wasn't much dispute about whether you  
13 should spend money at those levels.

14 There are always people who say you should spend  
15 infinite amounts of money, but they weren't very reliable.  
16 And there were very few people who said you shouldn't spend  
17 money when the cost of life is less than \$100,000. We  
18 published our proposals and if you read them carefully  
19 enough -- we didn't make it terribly explicit, but if you  
20 read it carefully, it is all in here. And out of the very  
21 many comments that we received, not a single person, not one  
22 person questioned this implied judgment that life -- the  
23 cutoff between when you should spend money to save lives and  
24 when you shouldn't -- fell somewhere between \$100,000 and  
25 half a million dollars.

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DR. WILSON: Do you have that case where it is published?

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MR. RICHARDSON: Yes, it's here. All of the comments are in Volume 2, and the discussion of the cost considerations is in Chapters 4 and 5 of Volume 1.

4

5

6

Well, that gave us some confidence that we were on the right track, and we went ahead and I think that is really all that I have to say about the question of criteria for establishing standards.

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We used a number which was directly related to health effects, not to man rems or some other surrogate. We used a range of values rather than a single number, and nobody objected. I guess we are both open for questions.

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DR. OKRENT: I will try one. Let me invent a hypothetical situation that, from the fuel cycle examination, you found the same kind of dispersion among fixes -- in other words, that there were some cases where it cost \$100,000 or less to defer premature death, or it was over half a million dollars, but you estimated that the risk to the individual that resulted when you used the cost of life way of deciding what to implement -- where that risk was 10 to the minus three per year to the individual, what would you have done?

Would you have said it's okay, what we need to do is meet this value of life criterion? If that wasn't okay,

kapHEE 1 if it wasn't -- would 10 to the minus four have been okay,  
2 would 10 to the minus five?

3 MR. ELLETT: It happened in the uranium fuel cycle  
4 standard, but this is a hypothetical question.

5 MR. RICHARDSON: It happens all the time. And I  
6 left out an important part of the discussion of those  
7 standards. You have to have two things to worry about when  
8 you establish standards, at least two things to protect  
9 people, and one of them is what is the collective impact and  
10 what is the maximum individual impact. And they are quite  
11 different and independent things.

12 There you are faced with -- well, it is another  
13 kind of a degree of arbitrariness. The range of evaluation  
14 for human life is certainly arbitrary, but you can go to  
15 society and say, Well, is it acceptable, what you've done?  
16 I guess the same thing is true of individual risk. In the  
17 case of the uranium fuel cycle, it was a fairly arbitrary  
18 decision.

19 We had situations at milling operations where some  
20 of the individual risks were fairly high, but the cost  
21 effectiveness of eliminating them did not fall in the range  
22 I just discussed. The situation for iodine emissions at  
23 reactors sometimes falls into the same category. And there,  
24 we got quite arbitrary. We looked at the level of risk that  
25 had been attained in the industry in most of the components

kapHEE 1 of the fuel cycle and we looked at the levels of risk that  
2 were attainable using cost effective methods, and they all  
3 fell at levels of dose which were below 25 millirems, and so  
4 we arbitrarily said, Well, for the sake of equity we will  
5 impose this kind of a limit.

6 Quite frankly, back in those days when we did  
7 this, we did not look to see what the lifetime risk was to  
8 an individual explicitly. It turns out now to be fairly  
9 high compared to some other levels of acceptability used in  
10 the agency for other standard-setting activities. 25  
11 millirems per year is -- I've forgotten the number -- it's  
12 on the order of 10 to the minus three or four per lifetime  
13 of doses, certainly worse than 10 to the minus five or six,  
14 which is what the agency strives for.

15 And we have to depend upon arguments that say,  
16 Well, that 25 millirems is really not the limit at which  
17 reactors and other facilities operate. It is the standard  
18 under which the regulations for ALARA sit -- as the  
19 framework in average exposures, for even common exposures to  
20 individuals are generally even much smaller than that.

21 I think if we were setting the standard today we  
22 would not be able to set a standard that was expected to be  
23 approached often at that type of level. But to answer your  
24 question, how do you arrive at the acceptability of a number  
25 10 to the minus four or five, six or seven, I have no

kapHEE 1 wisdom.

2 MR. LAVE: You made a statement that the agency  
3 strives for 10 to the minus five or 10 to the minus six per  
4 lifetime. Would you clarify that?

5 MR. RICHARDSON: Yes, the agency has recently  
6 published the cancer policy proposal.

7 DR. OKRENT: If I take that 10 to the minus five  
8 or 10 to the minus six per year in drinking water, for  
9 example, is that for everything in the drinking water, or is  
10 it for each item?

11 MR. ELLETT: Actually, it would be separate for  
12 man-made radioactivity and radium. That was just for  
13 administrative simplicity, we felt that anybody who was  
14 heavily impacted with man-made, for obvious reasons, surface  
15 water, so they would be subject to radium and vice versa.  
16 It isn't for each isotope; it is for all isotopes, sum.

17 DR. OKRENT: I thought that there was a goal that  
18 the agency had which was being applied more broadly than for  
19 radioactivity.

20 MR. ELLETT: That goal was articulated much later  
21 than the drinking water regulations. The drinking water  
22 regulation was the first regulation for radioactivity. All  
23 other maximum contaminant levels for drinking water were set  
24 on the basis of threshold that was obviously inapplicable to  
25 radioactivity. I think at the time they were established,

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1 the agency considered the risk limits rather high for  
2 radioactivity, but given the amount of radium contamination  
3 and fallout contamination, there wasn't much that anybody  
4 could do about it.

5 DR. OKRENT: No, but I am just trying to  
6 understand the answer to the question raised by Dr. Lave,  
7 which I thought said that there was a goal by EPA recently  
8 announced, that the lifetime risks from something -- I want  
9 to find out what the "something" is, should be. I don't  
10 know what you said. 10 to the minus five or 10 to the minus  
11 six.

12 MR. ELLETT: I think the EPA speakers that will  
13 come after me will be better qualified to speak on that than  
14 myself. I can only tell you what we have done in the Office  
15 of Radiation Programs.

16 The standards that I discuss with you were set  
17 before that policy was ever articulated by the agency. It  
18 doesn't become a retroactive truth.

19 DR. OKRENT: Somebody among the EPA speakers will  
20 be able to define the policy, and to what it applies? Is  
21 Dr. Page saying yes?

22 DR. PAGE: Dr. Anderson is here, too.

23 DR. ANDERSON: What was the question?

24 MR. ELLETT: I think it is a safe assumption.

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DR. OKRENT: Okay, I gather that it will  
2 automatically evolve.

3 DR. ELLETT: We will be here for further  
4 discussion.

5 DR. OKRENT: Are there other questions now for  
6 Drs. Ellett or Richardson?

7 (No response.)

8 DR. OKRENT: Thank you. I guess it will be useful  
9 to hear the succeeding speakers. I gather that Dr. Anderson  
10 is here, and she is also with the Environmental Protection  
11 Agency, and if I recall correctly, very interested in  
12 various aspects of toxic substances and so forth.

13 DR. ANDERSON: Are you ready for me?

14 DR. OKRENT: Yes, please.

15 (Pause.)

16 DR. ANDERSON: I apologize for walking in just at  
17 the last minute, so I don't know what I've missed. But I  
18 looked at the part outlined on the program for me and I  
19 represent the part of the PA that works in carcinogen risk  
20 assessment. And recently, we are enlarging the office to  
21 include the possibility of doing in informal ways risk  
22 assessments for other health effects.

23 Can you hear me, or should I put this on?

24 DR. OKRENT: I guess that it is preferred if you  
25 can.



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1 DR. ANDERSON: I notice specifically you said I  
2 would discuss case histories in the use of risk assessment  
3 and risk criteria in this office which is being formed  
4 around the carcinogen assessment group.

5 And I would make suggestions in appropriate goals and  
6 risk criteria that might be used for nuclear power reactors.

7 The first order of business is something I feel  
8 comfortable with. The second order of business, I certainly  
9 will have to leave to this committee and to the Nuclear  
10 Regulatory Commission.

11 I think that some of our experiences might perhaps be  
12 helpful in forming the basis for further thinking on your  
13 part.

14 The risk assessment activities in EPA have largely been  
15 involved with carcinogens and radiation, at least in formal  
16 ways of doing risk assessment, and having formally laid out  
17 risk assessment documents, become a part of the regulatory  
18 process.

19 So it is this area that I will discuss and I hope as a  
20 policy matter can provide some basis for your particular  
21 problems.

22 In 1976, the EPA did announce a policy for assessing  
23 risks associated with carcinogens and you can probably  
24 recall that the EPA was the first agency to do this. There  
25 are four major regulatory agencies involved in carcinogen

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gshHEE 1 regulation, including OSHA, Consumer Products Safety  
2 Commission, and the Food and Drug Administration.

3 But I think it is important to put risk assessment in an  
4 appropriate social context when we think about the use of  
5 risk assessment because it is within this context that we  
6 have found that risk assessment serves a particularly useful  
7 purpose in some case and in other cases, has really been  
8 able to provide very little for the regulatory  
9 decision-maker.

10 So I would like to talk about three areas that have  
11 certainly affected recent risk assessment within EPA. The  
12 first is what I call social policy, which clearly is laid  
13 out by the Congress.

14 And I'm not going to get into details of regulatory  
15 authorities, but only to suggest the differences in measure  
16 where risk assessment may be plugged into regulating  
17 carcinogens.

18 The second is the approach that EPA has taken in a  
19 scientific way to lay out these risk assessments so that we  
20 have some uniform procedure agency-wide for assessing risk  
21 and presenting the information.

22 And finally, I'm going to give you on this overhead  
23 projector some examples of cases where the agency has used  
24 risk assessment as a part of the process and has actually  
25 taken an action which has either reached the final stages of

gshHEE 1 regulation or is formally proposed.

2 In this area of social policy, suppose Congress decides  
3 right off the bat what is going to be regulated, how it  
4 shall be regulated, and who the regulator shall be?

5 Now there obviously are things that are not regulated, so  
6 risk assessment in those areas becomes an academic exercise,  
7 at least as far as regulators are concerned. Within the  
8 establishment that I spoke of, the Occupational Safety and  
9 Health Administration has an act which requires that it  
10 protect worker health to take feasibility into account.

11 So feasibility becomes the primary focal point for  
12 setting worker standards.

13 In the Food and Drug Administration, the Delaney clause,  
14 of course, is the clause that comes to mind. That is the  
15 only clause in the Federal Government that is an absolute  
16 ban clause. And clearly, the degree of risk assessment that  
17 is appropriate here or useful here is very much less than a  
18 risk benefit balancing situation, although there are other  
19 provisions of the Food and Drug Act which certainly do use  
20 risk benefit balancing approach such as in the drug  
21 provisions.

22 Also, in food contamination risk assessment has begun to  
23 play a role because of the importance of setting tolerance  
24 levels and looking at risks associated with inadvertent  
25 contaminants.

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1           Within EPA, we have almost the full range of legal  
2 requirements which permit us to use risk assessment in a  
3 widely varying number of instances and in many different  
4 ways.

5           And it also leads the scientist in the agency, and that  
6 certainly involves my group, to do risk assessments in more  
7 or less depth, depending upon what the practical framework  
8 is.

9           So EPA has seven major regulatory authorities under which  
10 we regulate carcinogens. And I'm using carcinogens, of  
11 course, as example because this is the one area where the  
12 agency has clearly stated a policy for using risk  
13 assessments and is doing risk assessments in a very  
14 consistent fashion.

15           These seven areas are covered under the Clean Air Act,  
16 the Water Act, the Drinking Water, Pesticides, Toxic  
17 Substances, Solid Waste and Radiation.

18           And you've already heard about radiation, so I don't have  
19 to talk about that. Nowhere in our provisions do we have an  
20 absolute ban clause, but we do have a number of different  
21 requirements in the FWPCA, or the Federal Water Pollution  
22 Control Act.

23           We have provisions or sections of the Act which are  
24 technology-based alone. Therefore, risk assessment can play  
25 very little role in actually regulating under that provision

gshHEE 1 where we have a provision which requires that national water  
2 quality standards based on health alone, risk assessment is  
3 almost the only compelling force in setting that standard.

4 And I'll show you some examples of that.

5 Under the Clean Air Act, we do have a provision which  
6 appears to be primarily health-based. So, again, risk  
7 assessment becomes a very important tool.

8 And pesticides and toxic substances require overt risk  
9 benefit balancing. And clearly, here is an opportunity for  
10 the full use of whatever risk assessment can provide in a  
11 risk benefit balancing approach.

12 So EPA now has this broad social authority or legal  
13 authority to regulate substances which are being subjected  
14 to risk assessment.

15 So the question then is how are we conducting these risk  
16 assessments so that we are able to present some coherent  
17 picture to the people making decisions under these various  
18 acts.

19 EPA has adopted a process for doing this and insofar as  
20 possible, the agency has decided that regulation will take  
21 place in a two-step process to the extent that the statutes  
22 permit this.

23 The first step will be a step that lays out fully, as  
24 fully as possible, the risk assessment part of the  
25 regulatory consideration.

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1 The second step will lay out, insofar as is possible, the  
2 social and economic impacts. The two will be considered  
3 together as is appropriate under the Act.

4 Doing the first part, which is our part today, the risk  
5 assessment part, the agency decided that it would adopt a  
6 consistent approach. And I think, as with any risk, the  
7 idea is to define, first of all, how likely the risk is to  
8 occur.

9 With carcinogens, this is the qualitative part of the  
10 risk assessment and we have decided to take a weight of  
11 evidence approach, recognizing that only rarely do we know  
12 for certain that something is a human carcinogen.

13 We express this qualitative part of the assessment in  
14 terms of the certainty of evidence, the weight of evidence,  
15 or the strength of the signal, taking everything into  
16 account.

17 The second part of the risk assessment is quite a  
18 separate part of the process and that is on the assumption  
19 that the risk exist, just how bad is it in terms of public  
20 health.

21 Needless to say, in these two areas, in carcinogenesis,  
22 the tools aren't all that certain. We would like to have,  
23 for example, more human epidemiology data so that we can  
24 close the gap between the laboratory experience and  
25 predictions and what we are actually observing.

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1 In the few rare cases where we haven't, we regard this as  
2 precious data in our possession.

3 It is the basis for doing the risk assessment in  
4 carcinogenesis and it certainly could stand strengthening.

5 Nevertheless, given the tools that we have now, we are  
6 going about this risk assessment work expressing the  
7 uncertainties, trying to clearly identify the gray areas  
8 and, in short, trying to describe these risk assessments as  
9 fully as we can to the regulator so that the uncertainties  
10 do come through loud and clear.

11 The carcinogen assessment group in EPA, with which I have  
12 been affiliated for 3-1/2 years, has been largely  
13 responsible for this work. We have done most of these risk  
14 assessments that I'm speaking of, and we are charged with  
15 insuring the adequacy of risk assessment activities  
16 agency-wide.

17 We have now to date looked at about 100 or so cases,  
18 something over 100. We certainly have found that our  
19 information is most often not what we have liked to see.  
20 There is data missing and information largely incomplete,  
21 and so forth.

22 But given all of the deficiencies in the tools and the  
23 lack of data, we still are able to use risk assessment to a  
24 large extent within the agency in making our decisions.

25 I have described the weight of evidence approach and the

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1 idea of expressing public health impacts in terms of  
2 magnitude and the public health problem.

3 I think the one tough area that the agency has not  
4 addressed, and it is the reason I can't help you with the  
5 second part of my assignment today, and that is exactly what  
6 level of the agency would be comfortable with accepting as  
7 an acceptable risk or as a safe risk, or at some level that  
8 we're even going to set as a target for regulatory action.

9 I think there are a number of reasons why this is  
10 particularly difficult for the EPA, where there are  
11 different legal requirements, as I described in the  
12 beginning, where risk benefit comes into play.

13 Then, clearly, some assigned level of risk isn't going to  
14 always apply because you are never going to duplicate or  
15 very rarely duplicate exactly the balance between the risk  
16 and the benefits.

17 So it makes sense in those areas for the risk level to  
18 fluctuate, depending upon this balancing act.

19 In some areas, we have absolutely been driven to propose  
20 levels based on some target level of risk. And as I said, I  
21 will show you that example. But on the whole, I think these  
22 legal requirements cause particular problems for the EPA.

23 We don't want to lock the agency into one target level  
24 and then find where there are absolutely no benefits at all,  
25 that we are really stuck with at least that level. And

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gshHEE 1 there are many other reasons that I won't go into.

2 I have a feeling that you probably heard a good deal  
3 about that.

4 I think one thing that has complemented the process in  
5 EPA with regards to carcinogenesis is the inter-agency  
6 activity.

7 The IRLG risk assessment doctrine has been adopted by  
8 whole agencies and is titled, "The Basis for Risk  
9 Assessment."

10 It was published in the Journal of the National Cancer  
11 Institute in July of this year. I was on the panel that  
12 wrote this document and we found it dovetails nicely with  
13 the work that we've been doing inside the agency.

14 But I think of primarily importance to you would probably  
15 be these case examples, which I do want to show you. These  
16 are just some of many, many circumstances we have looked at  
17 in EPA where risk assessment has been used. I had to be  
18 careful in selecting these because I did not want to bring  
19 you in some regulatory program where we really haven't  
20 decided what to do yet.

21 So these are examples in the public forum already and  
22 where a decision has been made. And I have selected them to  
23 demonstrate the different uses that risk assessment has that  
24 have been put to within the agency.

25 (Slide.)

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1 The Office of Air Programs is faced with a large number  
2 of possible carcinogens in the atmosphere to which people  
3 are being exposed both in high exposures around  
4 sub-population groups exposed to higher levels around point  
5 sources, and also nation-wide ambient exposure.

6 The office has a Section 112 that I mentioned that  
7 appears to be largely a health-based section of the Act and  
8 the question is: How can they implement a regulatory  
9 policy? They have decided to use risk assessments in the  
10 following ways.

11 They first have selected this list of organic chemicals.  
12 This list has been selected because they think they are the  
13 chemicals that they think that people are exposed to at the  
14 highest levels. They are very familiar organic solvents --  
15 chloroform bromide ethylene, dichloride ethylene oxide  
16 nitrosamines, tri-chloro ethylene, tri-chloro ethylene  
17 fina-iodine chloride, carbon tetrachloride.

18 So the idea was to present these to the carcinogenesis  
19 group for risk assessment treatment.

20 We went through -- we have been through many of these,  
21 not all of them, but we have been able to present the Office  
22 of Air Programs with, first of all, a qualitative statement  
23 on how likely these agents are to be human carcinogens.

24 So we have a weight of evidence, or qualitative part of  
25 the risk assessment which they can use.

gshHEE 1 In addition, they asked us to do something called a unit  
2 calculation, and that is to assume that the standard  
3 individual is exposed to one microgram per cubic meter for a  
4 lifetime, and give them a related health risk number so that  
5 they can use this number in setting priorities.

6 So I have a few examples to show you.

7 (Slide.)

8 They are using these unit calculations to make decisions  
9 about which agents appear to be the most potent carcinogens  
10 because they have to set some priority, they have to have  
11 some way of approaching their particular problems.

12 They are expressed in increased individual lifetime  
13 risks. You will see that they fall into categories of one  
14 chance in 10,000, one chance in 100,000, one chance in a  
15 million, and so forth.

16 The office couples these with some knowledge of exposure  
17 in order to set priorities based on human hazard.

18 DR. OKRENT: Those are lifetime risk, you said?

19 DR. ANDERSON: Right, based on exposure to one  
20 microgram per cubic meter.

21 (Slide.)

22 This particular office then is faced often with  
23 looking at residual risks and also looking at relative risks  
24 in order to decide both what category should be regulated,  
25 as well as whether or not they have done an adequate job in

gshHEE 1 regulating to some such standard.

2 This came up in the case of vinyl chloride. This table  
3 represents a comparison of risks associated with a variety  
4 of air pollutants.

5 In the case of vinyl chloride, Table 1 expresses the  
6 lifetime probability of cancer death due to maximum exposure  
7 and Table 2 expresses the lifetime probability of cancer due  
8 to average exposure.

9 The second column is the number of exposed individuals  
10 and the last column is the total cancer cases expected on an  
11 annual basis.

12 DR. WILSON: When you say maximum exposure, you  
13 mean maximum exposure now taking place? I mean, some of  
14 these clearly, there were fantastic exposures in the past.

15 DR. ANDERSON: Right. This is from EPA's point of  
16 view based on an assessment of who's being exposed now in  
17 the environment over which we have some regulatory options.

18 That is, people living in bands around these various  
19 plants where vinyl chloride is an environmental pollutant.

20 DR. WILSON: So that would not include the work  
21 place?

22 DR. ANDERSON: That's right, it does not include  
23 the work place. So we are looking at the possibility of  
24 regulatory exposure to those individuals living near these  
25 plants in the case of vinyl chloride.

gshHEE 1        So the idea was to look at some population groups at high  
2 risk and here you see before regulation, these individuals  
3 living closest to these plants had a fairly high increased  
4 lifetime risk due to the vinyl chloride exposures.

5        And there were certainly not an insignificant number of  
6 people being exposed at these high levels.

7        On the whole, we had then an average increased risk of 10  
8 to the minus 4, which is still certainly a considerable  
9 risk, and 5 million people being exposed at this level.

10       The agency took regulatory action. The resulting  
11 exposures reduced these risks by an order of magnitude.

12       So then the question came up, in fact, it came up in an  
13 impressive fashion -- we were sued to lower the  
14 standard. And the question was, should we cash our chips  
15 here? Should we make the companies involved in this  
16 particular pollutant spend more money? Or did we think that  
17 we had done an adequate job?

18       Our office of general counsel used a relative risk  
19 concept in arguing that we had, for the time being, done an  
20 adequate job in the vinyl chloride case. And they, in fact,  
21 presented these two tables in their brief, demonstrating  
22 that we had yet to regulate arsenic, benzene, cadmium coke  
23 ovens where we had fairly substantial risk to a fairly large  
24 number of people, both in the maximum category as well as  
25 the average category with the total impacts, in this last

gshHEE 1 column obviously being fairly considerable.

2 In the case of coke ovens, 149 expected cancer deaths per  
3 year.

4 So I think this is a good example of the use of risk  
5 assessment in looking at procedural risks as well as a very  
6 practical example of where risk assessment has been used in  
7 a relative fashion to make practical considerations and  
8 practical arguments for and against regulation.

9 By the way, these numbers are presented with decimal  
10 points, not because of the precision of the numbers, but we  
11 found if we take the decimal points away and round the  
12 numbers off, people simply can't duplicate our exercise.

13 And so they don't know where the numbers came from.

14 So I meant to emphasize those uncertainties. Now in one  
15 unique area in the agency, we have had to face the fact that  
16 the law, as it is written --

Q11 17 DR. OKRENT: Excuse me. Did your counsel win his  
18 case based on the position that it would be well to work on  
19 benzene and arsenic and so forth?

20 DR. ANDERSON: The case was won. And I don't know  
21 to what extent in the final decision we agreed that we would  
22 immediately work on benzene or arsenic because it was won  
23 some time ago. And I think that we haven't really achieved  
24 all that much yet, but we are working on it.

25 (Slide.)

pv HEE 1

2 In this particular case -- I realize this is  
3 difficult to read -- but this is an area in one of our acts  
4 where we don't have the option of considering technology or  
5 feasibility or cost and benefits or social and economic  
6 impacts.

7 The Act clearly says that we have to set a  
8 nationwide water quality criteria number, and it has to be a  
9 number, and our general counsel's office told us that if the  
10 number was zero it wouldn't be a practical matter that these  
11 particular cases are tried at local district courts and that  
12 the judge sitting out in the middle of someplace in the  
13 midwest being presented with a zero level would simply throw  
14 the thing out of court and never believe it for one minute.

15 So, in other words, the case has come up in EPA  
16 where we had to set some number, and the way we have gone  
17 about it is to use risk assessment as the basis for doing  
18 it.

19 These are proposed water quality criteria that  
20 have been published in the Federal Register. Comment has  
21 been invited. And they have not been finalized. I think  
22 generally the comments have been reasonably favorable, at  
23 least the methodology or the use of risk assessment has not  
24 been -- has not really been attacked all that heavily. Some  
25 of the methodology, yes. And in some particular cases, the  
data base for specific carcinogens. But as I said, these

pv HEE 1 are not finalized.

2 The idea here was to take the list of water  
3 pollutants that we had agreed to consider in the court  
4 consent decree to look at the dose response slope, the  
5 incidence slope, choosing the most sensitive species, and to  
6 come up with an associated water quality concentration that  
7 is associated with an increased lifetime risk of 10<sup>-5</sup>.

8 Now, we assumed -- we had to make basic  
9 assumptions about exposure, so we assumed here in the  
10 footnote a lifetime daily consumption of two liters of water  
11 per day and consumption of fish. And we took  
12 bioaccumulation into account because that is one of the  
13 driving factors in setting water quality criteria. So, for  
14 these carcinogens, we came up with these numbers.

15 Then, our water office decided, "Well, why use  
16 just 10<sup>-5</sup>? Why not propose a range?" So, they proposed the  
17 number associated with 10<sup>-7</sup>, 10<sup>-6</sup>, and 10<sup>-5</sup>, and asked for  
18 comment. So, they haven't really set one level yet, but you  
19 can see what they are driving at.

20 DR. LOWRANCE: What does that 10<sup>-5</sup> number mean?

21 DR. ANDERSON: It is the average increased  
22 lifetime risk of getting cancer from exposure to these  
23 particular chemicals based on an average daily intake of two  
24 liters of water contaminated at that level per day for a  
25 lifetime, over 70 years, and a consumption of .0187



pv HEE 1 kilograms of fish per day with the appropriate  
2 bioaccumulation factor.

3 DR. OKRENT: For each one, so if four of them or  
4 10 of them were in your water, you would have 10 times the  
5 effect?

6 DR. ANDERSON: Right. And since these are  
7 nationwide -- this point has been raised, you know, how do  
8 you take into account multiple exposures from a single river  
9 which happens to be very polluted? And the answer has to be  
10 that, first of all, these are obviously very low  
11 concentrations, and we simply haven't been able to take  
12 co-carcinogenesis into account in setting these levels,  
13 because where we have the information we have taken it into  
14 account but we for the most part just don't have that kind  
15 of information.

16 And also, since this is a nationwide number, it is  
17 not a localized number. Localized circumstances can be  
18 taken into account when state implementation plans are  
19 approved by the agency. Since these are criteria levels  
20 that are target levels, they are not enforceable levels.  
21 And then a state presents a scheme for meeting these  
22 standards. If they have some exceptional circumstance, the  
23 agency can grant a variance. So if they have a particular  
24 circumstance that can be taken into account at that stage of  
25 the process.

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2 DR. WILSON: I understand the numbers in the  
3 table, taking the two highest numbers -- the TTCO and the  
4 DBNA -- I presume those are different because BCME  
5 accumulates more; is that right?

6 DR. ANDERSON: Yes, that's right. And in this  
7 case, where there is bioaccumulation or substantial  
8 bioaccumulation, obviously the number was driven by that  
9 rather than the two liters of water per day.

10 This is a case where risk assessment has been  
11 used, and it is unique in the area, as far as I know, where  
12 it has been used as the only basis for proposing a number  
13 that is saying that protecting public health.

14 DR. OKRENT: So, if I understand correctly, this  
15 is a proposed goal and, in fact, it is proposed in terms of  
16 10-5 and 10-6 and 10-7?

17 DR. ANDERSON: The level associated with that,  
18 making certain assumptions about exposure into account.

19 DR. OKRENT: And if it were adopted, it would  
20 still be a goal?

21 DR. ANDERSON: The way the Act is constructed,  
22 these water quality criteria are criteria to be aimed for in  
23 the state implementation plans, so these are not enforceable  
24 levels, although our lawyers tell me they do take on a  
25 fairly substantial significance.

DR. OKRENT: That is like the way you are fixing

pv HEE 1 up the smog in Los Angeles.

2 DR. ANDERSON: Congress did this. Don't blame  
3 us.

4 DR. OKRENT: I am not blaming you. I am only  
5 saying you can't always meet EPA's goals.

6 DR. ANDERSON: Yes. And the reason I started the  
7 discussion by mentioning the importance of the social  
8 constructs largely created by the Congress, the extent to  
9 which risk assessment is useful, at least in EPA, very much  
10 depends on the practical circumstance.

11 (Slide.)

12 Finally, I wanted to show some examples of where  
13 risk assessment has been used in reaching benefit balance  
14 decisions. These are --

15 DR. OKRENT: Could I come back to the last point.  
16 Does EPA have any basis for measuring the cumulative risks  
17 from drinking water supplies with regard to carcinogenic  
18 effects as they exist now and, let's say, including  
19 radiation and without radiation for whatever it is -- some  
20 very big city water supplies, not those fortunate enough to  
21 have the water they make beer out of?

22 DR. ANDERSON: I think that what you're driving at  
23 is something we would very much like to do. We haven't been  
24 able to do this, and, in fact, again, in a practical  
25 framework where we have, for example -- I know you're using

pv HEE 1 this as an example -- I guess what you really want to know  
2 is have we been able to take total body burden into account?  
3 And I don't think we have. It would be ideal, but we  
4 haven't been able to do it.

5 We would like to be able to say that we speak in  
6 terms of very low risk anyway and we hope that when they are  
7 all put together for an individual exposure we are doing  
8 reasonably well. But we really don't know. So, we aren't  
9 approaching it that way.

10 There are, in fact, some areas in EPA where risk  
11 assessment is being left out of the process because it is so  
12 hard to do. And in the case of drinking water there has  
13 been a regulation to put charcoal filters in drinking water  
14 supplies to simply take who knows what out, and they really  
15 haven't been able to say what it is they're taking out.  
16 Their regulation in 10 city public water supplies where  
17 there are a lot of people taking drinking water from there  
18 and where the water is dirty enough and they say, "We think  
19 this makes sense. We can't spell it out in risk-assessment  
20 terms."

21 DR. OKRENT: I vaguely recall seeing a paper by  
22 Dr. Page when he was at Cal Tech on that area.

23 DR. ANDERSON: Perhaps he can shed more light on  
24 this.

25 Now, this is an area where we certainly use risk

pv HEE 1 assessment probably for the longest period of time.  
2 Pesticides certainly came into focus in the agency early  
3 on. And risk assessment, the risk assessment process,  
4 initially was written very much with the pesticide situation  
5 in mind.

6 In short, the amendments to the Federal  
7 Insecticide Act require a balancing of risk against  
8 benefits. This permits an opportunity to squeeze risk  
9 assessment for all its worth. And we would certainly like  
10 to have better tools. In each of these cases there was a  
11 part of the risk assessment which is not reflected on this  
12 chart, and that is the qualitative assessment. This is very  
13 important to EPA's process because the data can certainly  
14 give more or less certainty to the signal that something is  
15 in fact a human carcinogen. So, keep that in mind when we  
16 look at these.

17 In the case of chlorobenzilate, the qualitative  
18 data was not the strongest we'd ever seen. I think the  
19 response was in the male liver, which some toxicologists  
20 really don't regard as providing the strongest evidence at  
21 all. Nevertheless, we regarded this as some evidence that  
22 chlorobenzilate might pose a risk to humans. On the  
23 assumption that it was a human carcinogen, we did some  
24 qualitative risk assessment work. The primary use of  
25 chlorobenzilate was for citrus fruits. The exposure

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1 assessment provided to us assumed a nationwide exposure of  
2 220 million people. The calculation provided these lifetime  
3 increased cancer risks due to the exposure on the citrus.

4 Now, the second is the lifetime risk to the  
5 applicators because of their obviously higher exposure. The  
6 first number,  $10^{-6}$ , is the lifetime risk to the people  
7 eating the fruit because of some residues. In short, the  
8 agency regarded this -- or the office of pesticide programs  
9 and ultimately the administrator -- as a low risk. But in  
10 the case of citrus, the benefits are exceedingly high. The  
11 registration was retained, but in some moderate uses where  
12 the benefits were regarded as very minimal -- such as I  
13 think there was a minor use to control spiders around boat  
14 docks, and that use was canceled -- it was decided that even  
15 a low risk outweighs a very low benefit.

16 DR. LOWRANCE: Point of clarification. I don't  
17 quite understand how these numbers work. I think I am being  
18 simpleminded and just missing something. But would you just  
19 run across, say, the top line and tell how you got to the  
20 right-hand column?

21 DR. ANDERSON: Yes. I think this is important,  
22 and I have left it out. In using quantitative risk  
23 assessment in EPA, we try to emphasize that a two-pronged  
24 approach is appropriate. First of all, with EPA's mission  
25 it is very important to look at the increased individual

pv HEE 1 risk because there can be pockets of high exposure; in this  
2 case, the applicators, for example. So, it is important to  
3 focus on the individual's increased lifetime risk.

4 In this case, I didn't, when I made up this slide,  
5 I didn't have the number of applicators, so I couldn't fill  
6 in the last column on total impact. But in other words, we  
7 have an increased individual's risk, and then we have a  
8 total nationwide impact. If we only look at the total  
9 nationwide impact, we could have very few total cancer cases  
10 nationwide, but we could have pockets of exposure where  
11 individuals are suffering very high risks. So that is why  
12 we emphasized both.

13 Alternatively, where we have, in this case, 220  
14 million people exposed to very low levels with an increased  
15 risk of  $10^{-6}$  with a nationwide number of expected cancer  
16 deaths per year of 1.5 or so, you can see that there could  
17 be circumstances where 220 million people would be exposed  
18 to a risk that would be considerable, and you would see that  
19 impact in those total numbers.

20 DR. WILSON: I think one thing that is troubling  
21 us: if I take 220 million and multiply it by  $2 \times 10^{-6}$ , I  
22 get 440; I divide by seventy per life, and I get six  
23 instead of  $1\frac{1}{2}$ .

24 DR. ANDERSON: It should come out to  $1\frac{1}{2}$ .

25 DR. WILSON: I multiplied 220 by  $2 \times 10^{-6}$ , and

pv HEE 1 that's 440. I divide by 70, and that is six.

2 DR. ANDERSON: Okay, maybe I have made an error  
3 here.

4 DR. OKRENT: Well, in fact, if you look at the  
5 first line under "amitraz," where the numbers are similar,  
6 one gets eight, which is what Bill Lowrance said.

7 DR. ANDERSON: Yes. That evidently is an error.  
8 I apologize. You should get the answer by multiplying the  
9 first column by the second column and dividing by 70.

10 DR. LOWRANCE: I was just trying to be sure that I  
11 understood.

12 DR. OKRENT: It is probably 7.47, if you want me  
13 to guess.

14 DR. ANDERSON: Yes, that could be a typo. As long  
15 as you understand what I am getting at.

16 Nevertheless, that was regarded, whether it's one  
17 case or seven cases, as a low enough risk relative to the  
18 benefits and the registration for citrus use was retained.

19 In the case of amitraz, there was an application  
20 to the agency to consider this for registration. The  
21 qualitative data was very weak, indeed. We had a signal  
22 that it might cause cancer in one sex at one dose level of a  
23 tumor which was very high in the historical controls.  
24 Needless to say, blip of a signal was very uncertain, so we  
25 said this could be regarded as suggestive evidence only and



pv HEE 1 it would be very desirable to have another study.

2 But on the assumption that amitraz is a  
3 carcinogen, we went ahead and looked at the dose response  
4 curve we could construct from the data we had and said if it  
5 is a carcinogen the impacts would look something like this  
6 for consumption of apples for which the application was to  
7 use amitraz on apples and pears. We looked at nationwide  
8 impact on apple consumption eaters, and we came up with an  
9 increased individual risk of around  $10^{-6}$  and total impacts  
10 in the case of apples and pears of eight and six.

11 For the applicators, you will see that the risk is  
12 somewhat higher. So this permits the program to look  
13 specifically at special labeling requirements for the  
14 applicators.

15 In this case, the risk-benefit balancing decision  
16 came out -- I think it was pears -- that there were no good  
17 substitutes for, so they decided to grant a three-year  
18 temporary registration until more data could be generated.  
19 In the other case it tipped the other way because there were  
20 other pesticides available and the benefits were not thought  
21 to be as considerable, and that registration was not  
22 permitted.

23 So you can see how these things can teeter  
24 depending upon just how strong that benefit side of the case  
25 is.

pv HEE

1 DR. OKRENT: What would you think are the  
2 uncertainties in your estimate of lifetime probability of  
3 cancer deaths due to exposure? Is it larger than a factor  
4 of 10?

5 DR. ANDERSON: This is something that we don't  
6 have the best information, and I think, as I said in the  
7 beginning, we have very few cases where we can actually  
8 close the gap between the predicted cancer cases and  
9 observed cancer cases. In other words, there is great  
10 debate on the shape of the dose response curve within  
11 species extrapolation and even greater debate when you cross  
12 species lines.

13 We are now doing something in the carcinogen  
14 assessment group which I think will help. This whole  
15 quantitative assessment business is based on essentially six  
16 cases which were presented in 1975 as part of an NAS  
17 pesticide report, where I think three of the cases came out  
18 of the nose. Two of them were off by an order of magnitude  
19 lower. And one was off I think it was -- yes, it was off by  
20 an order of two orders of magnitude.

21 In short, the basis for doing the qualitative  
22 assessment is not all that certain, but it is stronger than  
23 the quantitative and the qualitative. We have about 25  
24 cases where we can compare the animal results with human  
25 results, and the correlation is pretty good. There is one

pv HEE

1 case where it is not that good, where we don't have the  
2 animal data, on arsenic.

3 DR. OKRENT: Well, let me pose the question a  
4 different way. We have been talking about several chemicals  
5 here. Let me assume if we consider 100 of these, can one  
6 rule out that for one of these that the lifetime risk turned  
7 out to be  $10^{-3}$  where you thought it was  $10^{-6}$ ?

8 DR. ANDERSON: No, we can't rule that out. What  
9 we have done in EPA is taken, as best we can, consistent  
10 assumptions and the same extrapolation model. Now, if you  
11 use a different extrapolation model, you get answers all  
12 over the place. So, the way the agency has been using this  
13 information is very much in a relative sense and not as an  
14 absolute correct number.

15 The other part that makes these numbers uncertain  
16 aside from the uncertainties in the shape of the dose  
17 response curve and across inter-species extrapolation,  
18 certainly is the lack of good exposure information.  
19 Exposure assessment is a very weak area indeed. So, when I  
20 started out, I said these numbers are uncertain. I want to  
21 emphasize again they are uncertain. But it is the best we  
22 have.

23 DR. OKRENT: Now, I am not faulting you in any  
24 way.

25 DR. ANDERSON: No. I just wanted to be sure, if I

pv HEE 1 hadn't emphasized that.

2 DR. OKRENT: We face in the nuclear safety area  
3 large uncertainties with regard to many predictions, and one  
4 of the thorns in our side is what to do when you talk about  
5 quantitative criteria in the face of these uncertainties.  
6 And I am trying to ascertain a little bit what it is one  
7 thinks could be the range of uncertainties here in the kinds  
8 of things you are looking at and how EPA thinks it is  
9 reasonable to, A, define the uncertainties and, B, to act in  
10 the face of them.

11 DR. ANDERSON: What we have done is we certainly  
12 know about the six cases that have been published. In  
13 addition, we say that we take the linear model because we  
14 want to -- we don't want to underestimate the risk because  
15 if we are underestimating the risk we could have a national  
16 disaster and not know it. But at the same time, if we are  
17 way overestimating the risks, it is not being particularly  
18 helpful to the process of setting regulatory actions. We  
19 hope we are not vastly overestimating, and certainly we  
20 don't want to underestimate.

21 What we are trying to do right now as an activity  
22 in the agency is to take the 30 or so possible cases where  
23 we have some human data and we have the animal data and we  
24 can compare the predicted human response with observed human  
25 response. Now, this doesn't mean we have the best

pv HEE 1 epidemiology studies in all these cases, but we can at least  
2 set an upper bound to see how close we are coming. And I  
3 think in the near future we will be able to say a little  
4 more about this. It looks like thus far -- and we're still  
5 going through our calculations and we are adding more cases  
6 -- that in about 90 percent of the cases we are coming out  
7 within an order of magnitude, again taking very consistent  
8 assumptions and the very same extrapolation model in every  
9 case.

10 DR. WILSON: Arsenic would be way off; wouldn't  
11 it? I mean, there is no way you can predict the human  
12 taking the animal data from arsenic, you can get the human  
13 data.

14 DR. ANDERSON: Yes, in the case of arsenic we  
15 don't have the animal data.

16 DR. WILSON: Well, there is some animal data, but  
17 it doesn't give the right answer.

18 DR. ANDERSON: Yes, that is the one exception  
19 where we really don't have good animal backup data.

20 DR. WILSON: If there is another chemical out  
21 there like arsenic and all you have is animal data, then  
22 that might be the catastrophe.

23 DR. ANDERSON: Well, I am not sure I understand.

24 DR. WILSON: Well, we have some -- I know of about  
25 60 different attempts to find carcinogenesis due to

pv HEE 1 arsenic, and they basically either find very small  
2 carcinogenicity in animals or none at all. And then we know  
3 it does -- it is moderately potent for humans. In fact, it  
4 has been disputed over the years, but I think it is now  
5 generally agreed that it is.

6 But if only you had animal data and then you are  
7 trying to predict human data and make a plan, "Shall we use  
8 arsenic as a pesticide," the answer would clearly be "Yes."  
9 And you might well be wrong. And I am just worrying about  
10 that. These are the sort of things we are getting in the  
11 nuclear business, too.

12 DR. ANDERSON: But this is the qualitative side of  
13 the question. This is where we keep saying we are more  
14 certain than we are on the quantitative side, and that is:  
15 how likely are all of these animal bioassay tests to give us  
16 appropriate signals to indicate cancer risk where it exists?  
17 In the case of arsenic, that is the only really good  
18 exception in 26 cases.

19 DR. LAVE: Benzene?

20 DR. ANDERSON: Well, there are some indications if  
21 you pick the right model you might get leukemia. That is  
22 another good example.

23 DR. WILSON: It is also the numbers on benzene.  
24 On benzene, what numbers we do have, if you put an upper  
25 limit on animal data, it is not inconsistent with human

pv HEE 1 data; whereas, the arsenic, the animal data is actually  
2 inconsistent. It is not that it doesn't exist; it is  
3 inconsistent.

4 DR. ANDERSON: Yes. In the case of aphyllitoxin, of  
5 course, we only looked at responses in rats. We would have  
6 thought aphyllitoxin was not a human carcinogenic. So,  
7 picking the right animal model certainly is important.

8 Just wandering through these quickly -- I think  
9 you're getting the drift here of what we are trying to do --  
10 chlordane and heptachlor, which the agency canceled and  
11 suspended, had substantial nationwide impacts mainly because  
12 the persistence and bioaccumulation in the range of the  
13 hundreds. So, the agency did cancel and suspend those  
14 uses. It retained only some underground uses for termite  
15 control.

16 Finally, this is a case of kind of an  
17 after-the-fact risk assessment where the agency, before the  
18 guidelines were adopted for risk assessment, set an action  
19 level for kepone in fish in the James River. Most of you  
20 remember, I am sure, the James River incident. This was set  
21 largely on economic grounds: how much could we permit and  
22 still not kill the fishing industry down there.

23 When we did the risk assessment calculation after  
24 the fact, we found indeed the risk was somewhat high  
25 relative to other risks, where carcinogens had been

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pv HEE 1 regulated within the agency.

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1 I think the agency is not taking a risk benefit  
2 approach to setting these action levels, and there have been  
3 a series of --

4 DR. OKRENT: Excuse me. So there has been no  
5 decision?

6 DR. ANDERSON: This was not changed, because the  
7 fishing industry has largely -- they haven't had a lot to  
8 fish down there, recently. They haven't changed this but  
9 they have taken a different approach to setting action  
10 levels, one where it is considered in the process of setting  
11 the action level. This was before the agency really started  
12 to do risk assessment work, that we were forced to use  
13 safety factors and a crystal ball, and some knowledge of the  
14 economic circumstances, in setting these levels.

15 DR. OKRENT: So, consumption was permitted, or was  
16 not?

17 DR. ANDERSON: Yes, with these levels. A few more  
18 cases came to mind that I thought might be interesting for  
19 you all. We have some localized problems where it's very  
20 hard to get something across to the public. Several  
21 examples. One, we have a discharge of nitrosamines in our  
22 Region 5 office in Indiana. There was sort of local panic,  
23 you know, nitrosamines belonging to a family of well known  
24 carcinogens, and the citizens were quite concerned. There  
25 were two drinking water communities taking the water

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kapHEE 1 supplies downstream from this discharge, so the question  
2 certainly wasn't a qualitative question of, are nitrosamines  
3 cancerous or not, but rather, what kind of impacts are we  
4 experiencing?

5 We had some exposure levels for these local  
6 communities and we did this kind of risk extrapolation work  
7 and we found that the levels to the people, the individual  
8 increased lifetime risk levels to the individuals living in  
9 these communities, was on the order of 10 to the minus  
10 seven. It turned out that we emphasized that these numbers  
11 are uncertain, that this is a relatively low risk estimate  
12 and certainly doesn't indicate a public health emergency;  
13 nevertheless, precautions seemed to be -- it seemed to be  
14 reasonable to take precautions to reduce exposure. It  
15 seemed to serve the regional office well. They were able to  
16 get this across to the communities and the stir really did  
17 die down fairly rapidly.

18 We had another similar discharge from a point  
19 source into air in upper New York State. It was a  
20 trichloroethylene discharge, and again we had some exposure  
21 levels at monitored levels around the plant -- in this case,  
22 it looked like the public health risk was in the  
23 neighborhood of 10 to the minus five, so what we're doing  
24 with these numbers is we are comparing these now, but we  
25 have kind of set up a scale and we're using the same model

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1 with sort of a scale of where regulatory actions with  
2 regards to carcinogens have fallen.

3 And we can say this is somewhere on that scale,  
4 it is somewhat higher, or it is the upper end or the lower  
5 end of that scale. That is about as close as we have come  
6 to really setting some target levels. But again, this was a  
7 case where it seemed to emphasize that there was not an  
8 enormous public health problem there, certainly not one  
9 calling for immediate closure of the plant. EPA certainly  
10 does have that authority. I think we recognized we have to  
11 use it very carefully.

12 But if we thought that the circumstance was  
13 certainly bad enough, we could simply shut the plant down.

14 DR. OKRENT: A 10 to the minus five number would  
15 arise from continued exposure at that level?

16 DR. ANDERSON: Yes. Assuming the individual lives  
17 there and is exposed for a lifetime of 70 years to the level  
18 around the plant, yes, the lifetime average exposure.

19 DR. OKRENT: Okay.

20 DR. CASTENBERG: I noticed in some of the entries  
21 in the last table -- used 220 million, the total population  
22 of the U.S. If you had an extensive list of all the  
23 chemicals used in the environment, how many of them would  
24 the average person in the United States be exposed to? 1000  
25 of them? 50 of them?

kapHEE 1

2 DR. ANDERSON: I don't know. That list of 42 that  
3 I started out with, which is just the Office of Air Programs  
4 list of likely organic solvents to which people are exposed,  
5 certainly gives us a good start. And that is only their  
6 first cut. I really don't know the answer to that. I think  
7 our Office of Toxic Substances could probably come closer to  
8 having information of that sort. I just don't have it.

9 DR. CASTENBERG: The reason I bring it up is I was  
10 also concerned about this 10 to the five number -- not  
11 concerned, but interested in the 10 to the minus five  
12 number. Then the numbers on your last page are 10 to the  
13 minus six numbers, for total U.S. population, the 220  
14 million. The numbers on here are 10 to the minus six, and  
15 give you numbers like eight deaths, 10 deaths, six deaths,  
16 and, at 10 to the minus five, then those numbers would be 80  
17 and 60 instead of eight and six -- and if I am exposed, or  
18 if you are exposing the population to 1000 of these things  
19 on the list, or 10,000 of these, those numbers start to get  
20 very large.

21 DR. ANDERSON: Yes, if in fact the exposures are  
22 to the same people at the same levels and so forth, although  
23 when we're talking about 10 to the minus five I think it is  
24 fair to keep in mind that everybody has a one-in-four chance  
25 of getting cancer, anyway, and a one-in-five chance of  
actually dying of it. So we're talking about a

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kapHEE 1 one-in-100,000 or one-in-a-million chance here. So, you  
2 could be exposed to quite a few things before you would have  
3 an incremental increased risk. That would be really  
4 outstanding; in fact, we sometimes look at some of these  
5 risks as levels that are below levels that would be detected  
6 by epidemiology. No detectable cancer when you get down  
7 this low.

8 So these are pretty low levels. But needless to  
9 say, if an individual is exposed to enough different things  
10 at low levels, presumably there is an accumulation of risk.  
11 There is no question about it.

12 DR. LAVE: Could I ask you about the bioassay  
13 data? In the case of aphilitoxins, as you mentioned, you  
14 get very different numbers depending upon whether you're  
15 extrapolating from mice or rats. How do you choose which  
16 animal to extrapolate from?

17 DR. ANDERSON: We always pick the most  
18 sensitive —

19 DR. LAVE: I thought that was your answer, because  
20 that, then, means you don't have a consistent set of  
21 methods. In some of the tables you've got human  
22 epidemiology data; in some of these you have quite a number  
23 of different animal species that were tested; in others, a  
24 single animal species; and therefore the ones where there's  
25 a single animal species, unless it happened to be the most

kapHEE 1 sensitive one -- which is not very likely -- then you may be  
2 off by a factor of 1000 in the table.

3 DR. ANDERSON: There's a little bit of intimation  
4 emerging that is somewhat helpful in this regard. Bruce  
5 Ames and Ken Hooper and some of his people are putting  
6 together -- they are computerizing all of the animal  
7 bioassay work that has been done and I recently heard Ken  
8 Hooper present a paper -- these results were not published.  
9 They were alluded to in a Science Magazine article.

10 What they are saying they are finding is where you  
11 have a positive response at all, and you threw out all of  
12 your negative responses, that you are coming out with a  
13 reasonable measure of potency; in other words, where you  
14 have a positive response, you don't get potency measurements  
15 all over the board. If your test model isn't going to pick  
16 up the cancer signal at all, then you would just get a  
17 negative response.

18 But this is certainly a problem. It is one of the  
19 problems. When we started doing cancer risk assessment work  
20 in EPA, we recognized it applies both to the qualitative  
21 work as well as the quantitative. Chemicals have been  
22 tested in very uneven fashions and not only that, some have  
23 been tested in 30 systems and some in only one, and not  
24 only that -- the quality and the design and conduct of the  
25 study varies all over the place.

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1 DR. LAVE: But when I first asked somebody at the  
2 FDA that question, they said to me, Well, of course the  
3 animals you use are the ones that metabolize whatever it is  
4 that we are exposing it to, the same way that humans are  
5 exposed, and metabolize it the same way that humans do. You  
6 obviously don't use an animal that doesn't metabolize it the  
7 same way.

8 And that made a lot of sense to me, except then  
9 when I talked to some of the people over on the other part  
10 of FDA, they said, Well, of course we don't do it that way.  
11 We use the most sensitive species.

12 DR. ANDERSON: Well, it would be nice if we could  
13 do what you first said; that is, be able to follow  
14 metabolic pathways and say, This test model has the same  
15 metabolic pathway as the human.

16 But most of the time we really have no earthly  
17 idea what the metabolic pathway is, so we couldn't possibly  
18 do it.

19 DR. WILSON: Wasn't part of the answer to that  
20 all of the animals one uses are, in fact, mammals, so in  
21 that sense there is a metabolism? We're not using insects  
22 and they're not using fish.

23 DR. ANDERSON: Well, of course the reason we're  
24 using rodents, again, goes back to the case of the 26  
25 chemicals where we have some correlation information. If we

kapHEE 1 had the same kind of data base for some other test model, I  
2 would think we could use it in the same way.

3 There is nothing particularly unique except for  
4 the amount of data, the data base.

5 DR. WILSON: Incidentally, we have a paper coming  
6 out which should be in press about now, comparing animal  
7 carcinogens in the different animals and it does have the  
8 results you described.

9 DR. ANDERSON: I think that's going to be very  
10 helpful.

11 DR. WILSON: We agree almost exactly with Bruce  
12 Ames' output. I sat down with him and we went over the  
13 computer output.

14 DR. ANDERSON: We have talked to Ken about coming  
15 in and presenting some of this, because it goes right along  
16 with the work you are trying to do, that is, the correlation  
17 project of predicted and observed for every case we  
18 applied.

19 DR. LAVE: Can I just see if I can paraphrase what  
20 you and Dick just agreed to, to see whether I understand it?  
21 That is that where you find that a substance is a carcinogen  
22 across a number of species, that the potency across species  
23 will be quite similar; does that paraphrase it?

24 DR. WILSON: Within a factor of 10, yes.

25 DR. LAVE: I would have thought some of the things



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1 we have been talking about earlier contradict that, but they  
2 may be the rare exceptions.

3 DR. WILSON: I think there may be three or four  
4 exceptions. Arsenic is the big one.

5 DR. OKRENT: Would you give your name?

6 DR. CACHERINI: Part of the answer to that  
7 question, in regard to the one part of FDA and the other  
8 part of FDA -- it depends upon whether one is looking for an  
9 estimate of quantification of the risk or whether they are  
10 trying to determine whether there is or is not a risk.

11 In the first case, one would require a more  
12 appropriate model to the human than in the second case,  
13 where one's looking strictly to see if they can incite a  
14 risk in an animal model. So I think the appropriateness of  
15 the use for the actual number of quantification of the risk  
16 requires a model which is consistent with the human.

17 DR. OKRENT: Dr. Page?

18 DR. PAGE: There are two other points that go  
19 along with what is coming out of Bruce Ames' laboratory.  
20 One is that part of the exercise was to figure out whether  
21 or not tests that came out negative were compatible with  
22 tests that came out positive, in the sense that if you  
23 looked at the potency that was applied by the positive test,  
24 you could try to figure out what the power function was of  
25 the negative one, to see whether or not it was likely that

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1 it would show up negative when that was given.

2 A lot of these inconsistencies between species  
3 turns out to be an inconsistency of the test design, where  
4 if you took into account the power of the test then you  
5 would see that these differences of potency aren't nearly as  
6 big as what would first appear if you looked at the test  
7 just sort of at face value.

8 The second point is that --

9 DR. WILSON: Isn't that just a statement that they  
10 were seeing positive -- people were saying positive or  
11 negative before and as soon as they put it in a number,  
12 saying an upper limit, and saying, this is less than  
13 something or other, then the inconsistency appeared? If you  
14 just say positive or negative, you can get apparent  
15 inconsistencies. But then you have to include the test.

16 DR. PAGE: That's correct. If you looked at the  
17 test and figured out what the power function was, and you  
18 graphed the tests -- that is what Hooper's people are doing  
19 -- then it looks like -- it looks much more compatible.

20 DR. ANDERSON: There's no question about it. You  
21 do simply have some chemicals that the test model is  
22 inappropriate -- for whatever reasons, they can't give  
23 enough dose to have the power to reach an adequate level.

24 I have just one other example I wanted to mention,  
25 and this is something that is plaguing EPA, and we are

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1 having to sit back and think hard about what to do -- and  
2 that is the likely impacts of dieselization.

3 It is a case where risk assessment is undoubtedly  
4 going to play a large role, and I think the synfuels  
5 development also goes along the same pathway. The way we  
6 are looking at this is we need some answers fast, as usual,  
7 and so it is not possible to get all of the research  
8 information we'd like to have.

9 So the way we are approaching this, from a risk  
10 assessment point of view, is to attempt to get some  
11 information to compare relative potencies with other  
12 combustion products for which we have more experience, such  
13 as coke ovens, cigarette smoke, coal tars -- and then get  
14 some relative comparison with diesel exhaust, because the  
15 question is not whether or not diesel exhausts are  
16 carcinogenic -- we know they are, as are most combustion  
17 products. But the question becomes: how much of a public  
18 health hazard are we likely talking about as we go along  
19 this dieselization pathway?

20 We very reluctantly did some very preliminary risk  
21 estimates based on coke oven information. And no matter how  
22 many caveats we put in and how much we emphasize we didn't  
23 particularly want to do this, our Office of Air Programs  
24 said they needed some information and something was better  
25 than absolutely no idea, and that they were compelled to

kapHEE 1 give at least some signal.

2           They wanted to know whether the dieselization was  
3 likely to impose a large public health problem, so we did do  
4 this, reluctantly, and we did find that it is conceivable  
5 that diesel exhausts are as potent as coke oven emissions,  
6 and if that data is at all applicable, and if their exposure  
7 estimates are at all accurate, that we could be -- it raises  
8 a warning signal. We could be dealing with a public health  
9 problem of some magnitude.

10           But we now have some research in progress where we  
11 are trying to get some answers. We have been trying to  
12 compare these potencies using skin paintings and  
13 intratracheal data, and we hope to have a biological basis  
14 for doing this work. But I think this is an example of  
15 trying to use the best tools we have in a very uncertain  
16 circumstance.

17           But nevertheless, having some rough idea of -- or  
18 ballpark estimate -- is better than having simply no  
19 information at all. So, in short, I think at EPA from the  
20 experience that I've been talking about, the experiences  
21 with carcinogens that I've been talking about, I have been  
22 able to show you examples where we use risk assessments to  
23 set priorities, to look at relative risk, when we are  
24 considering further regulatory action, to look at residual  
25 risk where we have taken an action and we want to know if

kapHEE 1 that is good enough, in risk/benefit balancing decisions and  
2 in one unique case where we have actually proposed these  
3 criteria based on increased individual risk level.

4 This concludes, I think, my contribution to this.  
5 And as I said, I simply can't help you with the second part  
6 of my assignment.

7 DR. OKRENT: Dr. Leachman?

8 DR. LEACHMAN: Yes, I am from the House Science  
9 and Technology Committee. I have a question with how much  
10 we have to know about -- the chemical carcinogens is  
11 something I know a little bit more about; namely, the  
12 radioactive or rather the radiation effects.

13 I think I understand correctly that the radiation  
14 effects we know vastly more than we do about the chemical  
15 carcinogens, and we also realize the difficulty that the  
16 chemical carcinogens act in different ways, whereas  
17 radiation generally acts the same way. But from a societal  
18 or even a legal point of view, we are faced with the  
19 realization that in the case of radiation we are now looking  
20 back in a somewhat retrospective way, and realize that we  
21 are very cautious, that most of the radiation we assumed in  
22 a very pessimistic way that there is a linear dose effect  
23 relationship.

24 We set up standards and we have the public very  
25 concerned. Now, in retrospect, we realize that was overly

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1 stringent, and the concern was not properly placed. I  
2 wonder whether there is a similar apprehension coming along  
3 in the chemical work, in the sense that you do not -- I  
4 sense that you do not now know the dose effect relationships  
5 of small doses and maybe there is hardly any effect, and  
6 maybe this is being overly stringent and overly cautious,  
7 notwithstanding the fact that Congress has laid it on you.

8 DR. ANDERSON: A couple of things. In my  
9 ignorance, I guess I didn't realize that the dose response  
10 at very low doses of radiation had been all that  
11 thoroughly --

12 DR. LEACHMAN: Well, there are two types of  
13 radiation, the low linear energy transfer, low LET and the  
14 high LET. Most of the radiation that people encounter,  
15 except in buildings, is the low LET and there the dose  
16 effect relationship is generally believed to be much less at  
17 the very low levels, than previously expected. This is on  
18 the basis of current data.

19 DR. ANDERSON: From BEIR.

20 VOICE: You have only read a draft of that. I  
21 think that is a limited interpretation by one group.

22 DR. LEACHMAN: Let's just say the majority, then.

23 DR. ANDERSON: I thought there was some debate,  
24 and I don't want to talk about it except to say that in  
25 general circumstances for chemical carcinogenesis that is

kapHEE 1 less certain than the radiation area. That has a much more  
2 solid foundation. When we talk about low dose exposures,  
3 several of the models do approach the area of the low dose.  
4 We are using, again, the best tools we have, as we can close  
5 this gap I've talked about, between laboratory experiments  
6 and some human observation, and I think it is possible, we  
7 certainly have many things that are suspect carcinogens  
8 which are in wide use --

9 DR. LEACHMAN: Could I ask the fellow one  
10 question? Do you use the Ames test at all? Do you always  
11 have to use the animal test?

12 DR. ANDERSON: We have taken a position on that,  
13 which is an official agency position and that is that in the  
14 qualitative sense, we regard the Ames test and some other  
15 short-term in vivo and in vitro test data as suggestive of  
16 carcinogenesis in the present correlation, but we have not  
17 yet been willing to use that information alone to form the  
18 basis for saying that we really believe that the chemical is  
19 likely to be a human carcinogen.

20 DR. LEACHMAN: But I was asking in a different  
21 sense.

22 DR. ANDERSON: In the quantitative sense, no, we  
23 don't use the data from the Ames test to do quantitative  
24 extrapolations.

25 DR. LEACHMAN: That's not the sense I am asking.

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1 I am asking: can you use the Ames test, which is so simple,  
2 cheap -- and you can get good statistics, to try to  
3 establish a dose effect relationship?

4 DR. ANDERSON: That is what I was getting to, and  
5 we don't. We are not doing it for carcinogenesis at all.  
6 We don't think it is appropriate. However, the agency is  
7 attempting to write some guidelines for another health  
8 effect, mutagenesis, and looking at what, if anything, would  
9 appear to be appropriate for a risk extrapolation for an  
10 endpoint of mutagenesis, not carcinogenesis.

11 And that point has not yet been answered, and the  
12 agency has not taken an official position on it.

13 DR. OKRENT: Well, thank you, Dr. Anderson. I  
14 found that very interesting and informative. And I look  
15 forward to having someone keep us better informed in the  
16 future than we have been in the past.

17 The next speaker is Dr. Page, also from EPA. But  
18 first, why don't we take a short break?

19 (Recess.)

20

21

22

23

24

25



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1 DR. OKRENT: If we can reconvene, I think our next  
2 speaker is Dr. Toby Page, who is also with EPA, indeed I  
3 believe from Cal Tech.

4 (Pause.)

5 DR. PAGE: Let me just start with slightly more  
6 than the usual disclaimer. Steve Jelenick was the one who  
7 was invited to come here. He is the Assistant Administrator  
8 for Toxic Chemicals, and since I have been working on the  
9 concept of unreasonable risk, I was the one to fill his  
10 shoes. However, I don't speak for EPA. I'm really a guest  
11 scholar on a leave of absence from Cal Tech, so you can't  
12 hold EPA responsible for anything I say. So that is a  
13 strong disclaimer.

14 Now, having said that, I think what I would like  
15 to do is just sort of talk a little in continuation of the  
16 kinds of things that you were talking about with Betty  
17 Anderson, and bring that into the approach that I sort of  
18 see might be emerging from the toxic substances program and  
19 try to draw some parallels with the kinds of problems that  
20 you people may be having with safety programs for nuclear  
21 power.

22 And of course the last is what I know the least  
23 about, so these will be sort of shots in the dark, but maybe  
24 they'll be useful and maybe they won't be.

25 Okay, now. One of the things that emerged from

mgcHEE 1 the discussion with Betty Anderson is this number of 10 to  
2 the minus 6 or 10 to the minus 5, and basically this is  
3 looking at some sort of criterion for acceptable risk that  
4 is focused on what is entirely on the risk side.

5 This is just not really in the cards for the toxic  
6 chemicals control program, basically because the legislative  
7 history requires balancing of cost, benefits, and risks.  
8 That is quite clear. And so, what we are really directed to  
9 do by the legislation is to develop a concept of  
10 unreasonable risk that is up front about the balancing  
11 process.

12 I think sort of as an aside there always is a  
13 balancing process, even in the Delaney Amendment which  
14 ostensibly says it does not have a balancing process. The  
15 problem with the Delaney Amendment in my mind is not that it  
16 precludes cost-benefit analysis. It is that it forces  
17 cost-benefit analysis underground, so that we find people  
18 unwilling to start the machinery to do appropriate tests  
19 because they are scared of how they might come out. If they  
20 came out positive, then they'd be forced to do something  
21 that would lose control of the process. So what we find is  
22 that in 19 years, only three chemicals falling under the  
23 Delaney clause which seems a bit strange -- there are a lot  
24 of carcinogens in the food supply.

25 So this sort of gets to the end of what I wanted

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1 to say, which is basically, if we think of a cost-benefit  
2 analysis not just on the chemical at hand but on the whole  
3 structure of incentives and institutions, we may get much  
4 more power and use and guidance out of it that way.

5 And in a way what I'm saying is, if we are going  
6 to try and set -- if we're going to try and make decisions  
7 about how you're going to have street lamps, traffic lights,  
8 or red and green, or whether you're going to have policemen  
9 and stop signs or yield signs for a city that has got 40,000  
10 intersections -- it probably does not make too much sense to  
11 do a thorough, year-long cost-benefit study on each one,  
12 each intersection.

13 You could do a cost-benefit analysis on the cost  
14 of information, and you may need to develop some rules of  
15 thumb that say we're going to be pretty crude, we're going  
16 to set a green light for 20 seconds and a red light for 20  
17 seconds, and then if there are problems, we may have to  
18 readjust, but we want to get a lot of traffic lights out.  
19 And this may be a better technique than spending five years  
20 or one year or whatever on a particular intersection.

21 Now the parallel I'm trying to draw here is that  
22 there are two levels to think about it. One is the level of  
23 the specific chemical, the specific problem at hand, and the  
24 other is the level of the entire institutional structure.  
25 And the latter forces you to be more qualitative in the

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1 analysis, less quantitative. But it allows lots of  
2 quantitative thinking.

3 And now I'm really sort of getting to the end of  
4 what I wanted to say, but I may as well say it right now,  
5 that it allows thinking in terms of trying to think through  
6 the principal agent problem, the cost of information. There  
7 are all of these disciplines that have a quantitative punch  
8 to them in the sense that they are rigorous.

9 On the other hand, their primary value I think is  
10 in developing rules of thumb and guidance towards what kinds  
11 of institutions make sense. And to sort of just say it  
12 straight out, it appears to me that that is really what the  
13 Three Mile Island report is trying to say -- that we focused  
14 a great deal on the particular minor problem at hand,  
15 whether or not a valve is going to fail, and we have left  
16 out of consideration the institutional structure whereby we  
17 worry about such questions as how operators are trained,  
18 what kind of incentives are placed on the operators to learn  
19 their material, to know what the regulations are, what kinds  
20 of substitutes there are for the regulations, legal fee  
21 applicants versus something else more decentralized, how we  
22 look at design errors ex ante rather than ex post, which is  
23 really a game of incentives. So I think it is that side  
24 that needs stressing, and it is that side that comes out of  
25 the Three Mile Island report, and I hope it is that side

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1 that will sort of clarify the rest of the remarks I want to  
2 make.

3 So having said that, the Toxic Substances Control  
4 Act mentions the term "unreasonable risk" at least 43  
5 times. It is hard to know how many more times it is in  
6 there because it's very hard to count them. Your eyes glaze  
7 over as you go through the Act. I am thankful to Harold  
8 Greene, a law professor at Georgetown University who made  
9 that comment before another session.

10 Now the term sometimes comes up "may present an  
11 unreasonable risk", and this is a trigger for testing, and  
12 sometimes it comes up with "presents an unreasonable risk",  
13 and this is a trigger for precautionary action. It may also  
14 come up in terms of "does not present an unreasonable risk",  
15 and this come out in terms of a responsibility to write  
16 something in the Federal Register to show why you're not  
17 regulating something in which you started a process. So  
18 whichever way you go, you have to worry about that.

19 There are some 43,000 chemicals on the list of  
20 inventory of inorganic chemicals that are not being used as  
21 pesticides. If they're used as pesticides and in commercial  
22 list, they may be on the list as well. Cosmetics are not on  
23 it. Tobacco is not on it. Things like that are exempted  
24 from the Act. So we still have a residual very large number  
25 of chemicals, being added to by about 400 per year, and you

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mgcHEE 1 begin to see why I have this image of setting street lights  
2 in a city with 40,000 intersections.

3 If you decide you're going to regulate one at a  
4 time and it takes five years to regulate one, then you're  
5 talking about a large number of years. It sort of reminds  
6 you of the kind of years we talk about for half-lives for  
7 radioactive things that you have to worry about. There are  
8 cheap tests like the Ames test that I think cost something  
9 like \$200 to do a simple version, \$1000 to do a really good  
10 version, to do the long term bioassay, the kind that Betty  
11 Anderson would like to see before she comes out and says  
12 that it really is a carcinogen -- that may cost a half a  
13 million dollars per shot -- so you're not going to be able  
14 to require every chemical to be tested, every suspicious  
15 chemical to be tested under a bioassay condition in order to  
16 decide whether it is really worth regulating or not.

17 Some very crude guess, which I guess is just sort  
18 of drawn out of the air but has some sort of guidance to it,  
19 that perhaps one to five percent of the synthetic organic  
20 chemicals today that have been created since the Second  
21 World War may be carcinogens, mutagens, or teratogens and  
22 therefore subject to regulation.

23 One of the things I should mention, however, is I  
24 think that it may be sort of an interesting point, is that  
25 right now almost the entire focus of concern is on cancer.

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1 On the other hand, it may turn out that the mutagens and  
2 teratogens pose greater harm socially than the carcinogens,  
3 partially because they destroy the gene pool for many  
4 generations as opposed to just kill one person today. This  
5 may also be a concern to be considered with radiation,  
6 because the same processes that cause cancer radioactively  
7 may be able also to cause mutations you don't see for two or  
8 three generations and then come up and have a larger impact.

9 Now the problem gets joined, I think, in a  
10 parallel way with the nuclear safeguards as it does with  
11 toxic chemicals, and that is that if we are trying to be  
12 remedial, the problem is sort of preidentified for us. We  
13 have an accident. Clean it up.

14 We find that asbestos insulation workers are —  
15 half of them are dying from lung cancer, so we know that  
16 asbestos is a bad agent. But our problem is to be  
17 precautionary. And then we have to ask the question, how  
18 much precaution is enough, and that becomes a very tough  
19 problem because the problems don't preidentify themselves  
20 when you're trying to be precautionary, like trying to look  
21 for a needle in a haystack, and until the needle announces  
22 itself, it is very hard to find.

23 Now our problem in some ways, I think, may be a  
24 bit more structured than yours, and that is because we do  
25 have a formal test that we can do on chemicals to see

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mgcHEE 1 whether or not they are carcinogens, mutagens, or what not,  
2 and we know we have some testing protocols, and it is kind  
3 of stylized. And the parallel problem for you, I think, is  
4 how do you smoke out a design defect before it has actually  
5 gone into an accident, and there is no sort of nice  
6 methodology you can grind and come out with an answer that  
7 tells you that, yes, indeed, this was a design defect,  
8 although after the accident you very often can identify it.

9 So in our sort of stylized world, there are sort  
10 of three basic ingredients that go into a concept of  
11 unreasonable risk. One of them is the baseline information  
12 that you have on hand before you make a decision whether or  
13 not your're going to require testing. This involves what's  
14 in the literature, what is in the premanufacturing notice,  
15 what is know, what inferences you can make about it, this  
16 sort of thing.

17 Then the second characteristic, the second  
18 ingredient is the characteristics of the test. And for, I  
19 think, all people who have enough of a sense of statistical  
20 hypothesis testing to sort of realize that when you go into  
21 a test, you can get hurt two ways. You can have a guilty  
22 chemical come out innocent, or you can have an innocent  
23 chemical come out guilty. You have false positives. You  
24 can have false negatives. And you trade off the probability  
25 of one against the other by setting the critical region of

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mgcHEE 1 the test.

2 It just happens that for the kinds of effects we  
3 are trying to find, this trade-off is quite unfavorable, and  
4 just a sort of quick example of this -- the most used  
5 bioassay test is sort of the NCI test that requires 50  
6 animals. It requires a five percent significance level,  
7 which means a five percent chance of a false positive, and  
8 for a medium level carcinogen, it offers very low power.

9 And example of this is, suppose that we have a ten  
10 percent response rate, background response rate for the  
11 animal, realizing that this does not mean that the animal is  
12 super-sensitive because after all, we have a 25 percent  
13 background response rate, so these mice are less sensitive  
14 than we are, and suppose we're looking for something like  
15 benzene, that might double this background rate under some  
16 increase of dose below its maximally tolerated level. And  
17 so, in other words, the background rate would jump from a 10  
18 percent response rate to a 15 percent response rate. What  
19 is the chance that the test is going to find this effect,  
20 this 50 percent effect?

21 Well, the chance is less than one percent. So  
22 here we are, we have an NCI type cancer test that has a five  
23 percent chance of a false positive and a .99 percent chance  
24 of a false negative, and in decision theory terms, this just  
25 does not make much sense. The reason that it doesn't make

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mgCHEE 1 much sense is, for many precautionary actions that we can  
2 take, the cost of the precautionary action may be low  
3 compared to the cost of not taking the precautionary action  
4 is the adverse hypothesis is true and this chemical really  
5 is a carcinogen at the potency we're talking about.

6 So to say that again, if we have -- the third  
7 ingredient is really the ratio of the cost of a false  
8 negative to the cost of a false positive, and so that is  
9 where sort of the economics comes in, and when we begin to  
10 worry about what the costs of information are, that tells us  
11 how much up front work we need to do to try to figure out  
12 what this ratio might be before we begin to proceed in  
13 requiring the test or requiring precautionary action.

14 Let me put the matter sort of the other way.  
15 Suppose that the cost of information was zero, that we could  
16 do these cost-benefit analyses at no cost and no time, then  
17 it would make sense to do everything up front in the sense  
18 that before we require tests, we would figure out what  
19 regulation would be in order if the test came out positive,  
20 at what level, and what the benefits foregone of the  
21 chemical are once you regulate it, what the costs of the  
22 chemical are in terms of not regulating it, and living with  
23 the carcinogenic or mutagenic or teratogenic properties, to  
24 do all that work up front.

25 However, when we begin to worry about the cost of

mgcHEE 1 information in terms of both time and resource cost, because  
2 these are expensive kinds of things to do, then we are  
3 beginning to be in this traffic light setting problem where  
4 it may not make sense to do as much up front work on the  
5 cost-benefit side before we require the tests, as up front  
6 work on the baseline information side to see whether or not  
7 this hypothesis looks like there really is an adverse  
8 hypothesis.

9           So what I'm saying is that, instead of worrying  
10 about your cost-benefit analysis only in terms of this  
11 chemical, if we worry about the cost-benefit analysis and  
12 the level of the entire decision-making process, we may make  
13 much better use out of it.

14           So that is the point. Let me just try to sort of  
15 draw this parallel a little more. It seems to me that in  
16 the big accidents that have happened and the interesting  
17 near-accidents in nuclear power, we have a combination of  
18 three factors. We have the mechanical failure, the design  
19 error, and human error, and they sort of intermix. They  
20 come together.

21           And the problem is that one of these three is easy  
22 to study and the other two are real hard to study, and you  
23 can guess which one is the easy one to study. It is the  
24 mechanical failure. And that is what has gotten the lion's  
25 share of the attention.

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1                   And this situation is a little bit like the old  
2 joke of the man who lost a coin, and he's looking under a  
3 streetlamp for it. A bystander comes along and says, "Can I  
4 help you find this coin." And the man says, "Oh, yes, help  
5 me find the coin." And the man says, "Where did you drop  
6 it?" Then he said, "Oh, across the street." And he says,  
7 "Well, why in God's name are you looking here?" And he  
8 says, "That's where the light is."

9                   So the problem is to think more systematically in  
10 a cautionary way of smoking out some of these design areas  
11 and some of these incentive systems that would make human  
12 error less likely. And I think that may be where the big  
13 payoff is. I think that is really the point I want to make.

14                   Let me make just one other point and try to get  
15 some reaction or discussion. I think when we take these  
16 three ingredients into account that involve the toxics  
17 problem, they also involve the nuclear safety problem with a  
18 vengeance, in a sense. And that is that when we are dealing  
19 with the ratio of cost to mistakes, the downside costs of  
20 being wrong and not finding some design error may be  
21 thousands and billions of tons bigger than the downside cost  
22 of being overly precautionary for some little tidbit.

23                   So when we start looking at incremental cost of  
24 safety and the whole potential on the downside, it is very  
25 large. And so that sort of steers you to make all sorts of

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1 precautionary pile-ups, and the question is where do you  
2 stop.

3 DR. WILSON: On that, I'm not quite sure what  
4 you're saying there, because -- excuse me -- I'm stopping  
5 you there because it seems appropriate, because are you  
6 trying to imply that the costs of not finding an error and  
7 the actual cost of having to fix it up, or there is another  
8 cost which we find very clear from Three Mile Island and  
9 which is probably not the cost of fixing up Three Mile  
10 Island, but the cost of the public concern that causes --  
11 which is an indirect cost, which is very much greater than  
12 the actual direct cost?

13 DR. PAGE: Well, I mean both.

14 DR. WILSON: Are you meaning both?

15 DR. PAGE: Yes. Maybe it would be worth -- I  
16 don't know, how do you want to do this? You want to open  
17 this up to discussion?

18 DR. OKRENT: Well, why don't you finish? We have  
19 time.

20

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gshHEE 1 DR. PAGE: Let me just give you a little stylized  
2 example of this to sort of pinpoint what I mean by these  
3 asymmetries.

4 Suppose that you're feeling a little poorly and you walk  
5 into your doctor's office and you say, I'm feeling a little  
6 poorly and so he gives you his check up and he says, don't  
7 worry too much. I think you're okay.

8 On the other hand, I've examined a lot of people like you  
9 and I find that one out of 20 people like you has this rare  
10 tumor.

11 And you begin to start shaking. So you have this 5  
12 percent background level, and that's what I mean by the  
13 baseline information, a 5 percent chance that the adverse  
14 hypothesis is true.

15 And you say, well, what should I do? And he says, well,  
16 I think we should give you the test and the test is pretty  
17 good. It has only -- if you're due to have a tumor, there's  
18 a 90 percent chance that it will show up positive. If you  
19 don't have the tumor, there's a 90 percent chance that you  
20 will show up negative. Come back in two weeks and take the  
21 test.

22 So you take the test and you come back in two weeks and  
23 he says, look, you'd better sit down. The test came out  
24 positive. So you sit down and he says, but don't worry too  
25 much. It is still unlikely you have the tumor. And you

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1 say what? How can this be? I thought it was a good test.

2 And if you applied Bayes' theorem to the information I have  
3 given you, it turns out that you really do only have a 30  
4 percent chance of having this tumor, even after the test is  
5 true.

6 So then he says, well, should I have the operation or  
7 not?

8 Let's stop right here for a second. One point is that I  
9 think most people, when they are dealing with low  
10 probability events and things that require taking into  
11 account badly formed baseline information and new  
12 information, they do a real poor job. There's a whole  
13 history on this.

14 Kuhneman and Tversky have an article in Science that show  
15 that people handle low probabilities very poorly in  
16 updating the situations, which is part of the problem that I  
17 think that you face as well as we face in toxic chemicals.

18 So you say, well, should I have this operation? It was  
19 only a 30 percent chance of having the tumor. And the  
20 doctor said, I think you should because the cost of dying of  
21 cancer is at least 10-fold times higher than the cost of the  
22 operation, as nasty as it is.

23 And you say, well, if I believe in subjective  
24 probabilities, and that's what the meaning of 10-fold means  
25 in the betting situation, then I'm willing to reject the bet

gshHEE 1 and take the precautionary operation.

2 So then you take the operation and you come back and find  
3 out that you were one of the lucky people that didn't have  
4 the tumor after all, that it was a precautionary operation  
5 and you sort of wonder how do you avoid malpractice suits?

6 And he says, well, basically, I give all of my  
7 information up front. People know this is precautionary to  
8 begin with. And you say, well, it is a mistake ratio of 2  
9 to 1 to unnecessary operations, to unnecessary operation.  
10 And he says, no, that's not true at all. My mistake ratio  
11 was 19 to 1.

12 I have for every false, negative, I sustain 19 false  
13 positives.

14 Now if you grind through basis theorem again, you will  
15 find that is also true. And that's another place where  
16 people don't think very well about it.

17 So then the question becomes, when we look at toxic  
18 chemicals, we find lots of examples of false positives. You  
19 can quickly find 20 or 30 examples of false positives, but  
20 you can only find 2 or 3 examples of false negatives.

21 So the question is have we been fooling ourselves as to  
22 the right balance of our mistake ratio? Have we not been  
23 precautionary enough?

24 So that is a question of looking at expected values and  
25 seeing whether the numbers make sense or not.



gshHEE

1 DR. WILSON: I did not catch the sign of that  
2 statement. Have we been too cautious, was that?

3 DR. PAGE: No, I'm saying have we been fooling  
4 ourselves in the sense that we have paid a lot of attention  
5 to false positives and we have protected ourselves a lot  
6 against false positives. We have been unwilling to classify  
7 something as a carcinogen until there is overwhelming  
8 evidence that it is a carcinogen. And in doing so, we find  
9 lots of classifications that go from safe to dangerous,  
10 which is the sign that we have had a false negative -- I'm  
11 sorry, which is a sign that we've had a false positive.

12 I'm sorry, this is a sign that we have had a previous  
13 false negative when we take a chemical which we think is  
14 safe and then we find it's dangerous.

15 Now there are a couple of cases where we take a chemical  
16 which we classify first as dangerous and then we loosen up  
17 and say, ah, maybe it's a little safer. The question is  
18 which way do these loosening and tightening operations go  
19 and what is the ratio of them?

20 So that becomes a way of calibrating what you think as to  
21 how precautionary you should be. And also, it gives you a  
22 way of approaching the problem of trying to decide what  
23 people are really implicitly judging as to the underlying  
24 likelihoods of that, of the hypotheses of the ratios of  
25 cost.

gshHEE 1 Now when I said that you face this problem with a  
2 vengeance, what I meant was that two of these asymmetries  
3 can be summarized in terms of what used to be called the  
4 zero infinity dilemma, where the first half of the zero part  
5 is that the probability of the adverse hypothesis is  
6 considered to be many-fold times less than the probability  
7 of the benign hypothesis.

8 For chemicals, we may be dealing with the probability of  
9 the adverse hypothesis being sort of one percent, five  
10 percent. These are sort of the subjective estimations that  
11 people will give you as to -- well, for example, if you ask  
12 people -- I hate to answer this people, but you ask them  
13 anyway. You say, what do you think the probability is that  
14 the cancer rates might double in the next 30 years due to  
15 all these synthetic organics we've been pumping into the  
16 environment in the next 20 years?

17 And they will hem and haw and you force them to have a  
18 median estimate from which they think it is just as likely  
19 to go more rather than less.

20 And I've done this a few times and it comes out somewhere  
21 from 1 to 5 percent, which is high considering the downside  
22 risks.

23 On the other hand, I have a feeling in the nuclear safety  
24 area you are willing to push these priors way down many  
25 orders of magnitude less than that.

gshHEE

1           So we're talking about what kind of prior that you are  
2 willing to live with. So that is what I mean. These  
3 asymmetries may be more striking in the nuclear power field  
4 than they are in the toxic chemical field.

5           Let me just stop there and engage in a discussion.

6           DR. OKRENT: I have a question. You said that you  
7 were working on unreasonable risk, I think that that was the  
8 term. And I was wondering if you were going to quantify  
9 unreasonable risk for me in some way.

10          DR. PAGE: I think where this line of analysis  
11 goes is, first of all, it says it will be unlikely that we  
12 will come out with -- it is possible that we will come out  
13 with a rule of thumb that says we will live with chemicals  
14 that have risks less than 1 out of a million. But that is a  
15 rule of thumb.

16          That might be like setting the traffic lights in the  
17 city. It is possible. It could come out that way. But I  
18 think it's unlikely that it's going to come out that way. I  
19 think it's much more likely that it's going to come out to  
20 be a statement that says that the standard of proof under  
21 which you required this much evidence rather than that much  
22 evidence in order to take a precautionary action is  
23 dependent upon some sort of critical ratios which have to do  
24 with your feeling on the ratio that the cost of a false  
25 negative to the cost of a false positive, your feeling of

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1 the priors that has to do with the level of suspicion that  
2 you have on the chemical before you go into the process of  
3 gathering more information on it and how sensitive the test  
4 is, how favorable your trade-off curve is between false  
5 positives and negatives.

6 And that has something to do with whether or not you're  
7 going to require a half million test or a million dollar  
8 test or a \$2000 test.

9 So that I think what is going to happen is that there are  
10 going to be qualitative packages of what needs to be done in  
11 what situations that are not going to be terribly  
12 formalized. They are going to be judgment calls, but they  
13 are going to be guided judgment calls.

14 DR. WILSON: Coming back to something that you are  
15 saying, when Elizabeth Anderson was talking about this false  
16 positive and false negative question, a thing which everyone  
17 said where it is not found to be carcinogenic and people  
18 suggested that they haven't looked carefully enough -- if  
19 one looks through the data on this question of people just  
20 saying, it is carcinogenic, it isn't.

21 And it is only just recently that this quantitative thing  
22 has been answered at all to actually get in there. Is that  
23 actually getting into the level of the unreasonable risk  
24 question? This risk is 10 to the minus 10. Even leaving  
25 yourself a factor of 100 or 1000, it really isn't worth

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gshHEE 1       bothering about. But this risk is 10 to the minus 1, and I  
2       have really got to move hand and earth to get it done.

3               Is that sort of thinking likely to come about?

4               DR. PAGE: I think so, sure, and even more so. I  
5       mean it may turn out that if you are looking at -- here's an  
6       example of what we're talking about. Suppose that you're  
7       looking at a medium level carcinogen, maybe benzene as an  
8       example, which has an extraordinarily large exposure.

9               Then for that kind of carcinogen, you may want to not  
10       live with a 5 percent significance level in the test. In  
11       other words, you do a test and you find that it is  
12       carcinogen of this potency with a P value of 10 percent, as  
13       opposed 5 percent.

14              That may be enough for a precautionary regulatory action  
15       because the exposure is so high and the power of the test is  
16       low for the potency that you are concerned about for  
17       regulatory purposes.

18              So in other words, this potential ratio of cost of wrong  
19       decisions either way helps guide the process of what kind of  
20       sensitivity makes sense in order to take the precautionary  
21       action.

22              DR. LAVE: That would say that you would not do a  
23       50 rad test.

24              DR. PAGE: That's right. Let's say that you want  
25       to have a more expensive test with a more favorable

gshHEE 1 trade-off all along the line and then still adjust your  
2 fine-tuning the test between false positives and negatives.

3 So instead of coming out with a single one rule of thumb,  
4 I think that we're going to get a number of rules of thumb.

5 DR. OKRENT: It seems to me that what you've been  
6 discussing is what level of information and what level of  
7 uncertainty goes with what anticipated level of risk.

8 And I would argue in fact that in the nuclear reactor  
9 game, the same thought processes are gone through, except  
10 they are not so labelled.

11 There are some devices that you have to build and test  
12 and test and test to show that they are going to work. And  
13 there are others for which there exist general design  
14 criteria. And the designer says, yes, I designed it  
15 according to these criteria.

16 That is taken as probably good enough with a minor audit.  
17 And in a sense, these are related to how important you think  
18 the function is and what happens if the function fails.

19 So, what I'm still interested in is whether you see a  
20 chance of defining unreasonable risk, unacceptable risk,  
21 acceptable risk. I don't care which adjective you put in  
22 front of the word, but is there some way you see of  
23 quantifying one of these in the field in which you are  
24 working, and with an uncertainty band, if you so wish?

25 DR. PAGE: I think instead of having an absolute

gshHEE 1 number that says one out of a million, that's the sort of  
2 thing that you're asking about, whether or not things might  
3 tend toward a number like one out of a million is  
4 acceptable, one out of 100,000 is not acceptable.

5 Is that right?

6 DR. OKRENT: That is being done implicitly by the  
7 actions that are taken anyway. I mean, we looked at a list  
8 of things that might be in water and so forth. And if you  
9 are accepting this in water, whether you say it or not, your  
10 best information is that this is what is going on.

11 DR. PAGE: Well, I think that in EPA, especially  
12 in the radiation program, there is an effort to try and  
13 develop a rule of thumb that is sort of absolute like that.

14 But in the office of toxic chemicals and substances, this  
15 is less likely to happen because of a mandate to do upfront  
16 balancing of cost and benefits. That is written right into  
17 the legislative history.

18 So that the kinds of rules of thumb that are likely to  
19 emerge when you put all of this together and you worry about  
20 the cost of information I think are going to say something  
21 about what standard of evidence is appropriate in this  
22 situation and what kinds of mistakes we're willing to live  
23 with in the aggregate, that kind of thing. And how long, if  
24 you have to do a two-year cost and benefit analysis before  
25 you come out with a regulation, this may be too long. So

gshHEE 1 what else can you do?

2 I think what I am suggesting is that the path of this  
3 kind of approach which really is an application of worrying  
4 about incentive compatability and this sort of thing is to  
5 worry about what kinds of incentives need to be created so  
6 that the system will work better sort of on its own.

7 And it seems to me that this is very much the spirit of  
8 the Kemeny Report. It says that we spent much too long  
9 worrying about will this valve fail, sort of without humans  
10 around, and not enough time worrying about what kind of  
11 incentive structure do we need to have so that utilities are  
12 going to have trained operators, or so that they're going to  
13 have the valves and alarm systems and have the alarm systems  
14 as hierarchical so 100 alarms don't ring all at once, or so  
15 that you can see the meters, they are not all hidden from  
16 view, or all are not hidden from view.

17 DR. OKRENT: You see, I can find an equivalent  
18 analogy in the practice of medicine.

19 There was a time in the '20s when doctors were rather  
20 careless about prescribing radioactive materials as health  
21 improvements. And in the 1950s, they were rather careless  
22 about giving children radiation treatments.

23 And they now, I think, many of them are more cautious,  
24 but not necessarily all because there are a certain number  
25 that give X-rays to protect against malpractice suits, and



gshHEE 1 so forth.

2 I have little doubt there is a change in people's  
3 thinking after they know more. I assume that in the  
4 practice of, for example, looking at toxic chemicals, things  
5 have evolved and there are some things that, as you said,  
6 were thought to be negative or false negatives, and so  
7 forth.

8 And you could, I think, look at the nuclear reactor  
9 business and say, they had a false negative because they  
10 thought that by, in fact, putting in lots of equipment and  
11 not relying on the operator, they had protected themselves  
12 against something.

13 You can see parallels, I think, in each technology. And  
14 I guess I tend to expect them. I guess you would like to  
15 have perfection, but I haven't seen it, as I say, in the  
16 practice of medicine, and I've been in the middle of some of  
17 the errors that the practice of medicine has made.

18 DR. LAVE: May I paraphrase something that Toby  
19 said to make sure it is clear?

20 I think that in part of the agreement, or at least part  
21 of what he was answering was that if the general perception  
22 is that nuclear power is totally unnecessary, then the  
23 acceptable risk level is going to be enormously different  
24 than if the general perception is that nuclear power is  
25 really necessary for our existence.

gshHEE 1 DR. OKRENT: I agree.

2 DR. LAVE: But then when you say what is the  
3 acceptable risk level, that is being postulated on some  
4 general view as to what contribution nuclear power will make  
5 toward our social well being.

6 Insofar as that changes rapidly, for example, and you can  
7 certainly expect the perception as to what the acceptable  
8 risk level will be will change rather rapidly.

9 DR. PAGE: That can be sort of added to, and I was  
10 just reading through the Three Mile Island report this  
11 morning. One of the things they say that struck me is that  
12 the accident itself, even though it didn't go its full path  
13 and people did not get heavily dosed, was clearly  
14 unacceptable from a social policy point of view. And  
15 another Three Mile Island accident in the next few years  
16 would also be unacceptable in the sense that it would have  
17 enormous political ramifications and what would happen to  
18 the industry.

19 So I guess part of what I'm saying is that a notion of  
20 acceptable risk has to do with sort of the individuals that  
21 may suffer because they are getting individually dosed with  
22 radiation because there has been some accident.

23 But another part of the notion of acceptable risk has to  
24 do with the entire energy program and what kinds of  
25 accidents are acceptable in a political sense of setting

gshHEE

1 down the industry or keeping it going.

2 And sort of the flavor that I got from the Three Mile  
3 Island report was that we have to look at the latter.

4 DR. LEACHMAN: I'm curious about what Mr. Lave is  
5 saying and what you, the speaker, are saying. Are you  
6 talking about the headlines here or are you talking about  
7 some realities when you're talking about whether nuclear  
8 energy is needed and how people perceive these things?

9 What are you going to do instead? What are the  
10 comparative risks? I don't know what your points are.

11 DR. PAGE: Well, the point is that if people  
12 believe that --

13 DR. LEACHMAN: What is "people." I don't  
14 understand what you mean. Are you talking about a public  
15 opinion poll? Are you talking about the Union of Concerned  
16 Scientists? Are you talking about what the knowledgeable  
17 scientists believe?

18 What is "the people"?

19 DR. PAGE: I'm really talking about the entire  
20 legislative process in the sense of whether or not a  
21 moratorium gets voted in Congress or not.

22 DR. LEACHMAN: Well, that is decided.

23 DR. PAGE: Well, it's not decided because there  
24 could be another Three Mile Island accident tomorrow.

25 So the question is what is the level of safety that we're

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gshHEE 1 willing to live with in reference to the likelihoods of  
2 other partial accidents and what the likely public response  
3 to it is, as it is filtered through the political system?

4 I mean, those are real. The attitudes are real. And if  
5 people get very upset and they close down the industry, that  
6 is a real decision.

7 DR. LEACHMAN: There is a real indication a couple  
8 of years ago with a vote, and it was a legislative consensus  
9 2 to 1 against shutdown.

10 Now I'm not sure what people you're talking about and  
11 what these opinions are that you're speaking about.

12 DR. PAGE: The impression that I got from reading  
13 this Three Mile Island report is that the repercussions of  
14 another Three Mile Island accident might reverse that vote.

15 So this becomes part of a calculus as to what is an  
16 acceptable risk. And especially if you believe that nuclear  
17 power is necessary because there are no good alternatives.

18 Then that puts a different flavor on what safety needs to  
19 be done, so that there won't be these political  
20 repercussions.

21 DR. LEACHMAN: I'm not sure what context you're  
22 saying that in. Are you saying in comparative risks or  
23 something else?

24 DR. PAGE: What I'm saying is we tend to think in  
25 terms of sort of the real risk of people getting hurt and

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1 how many cancers there are going to be and that sort of  
2 thing.

3 But there's also a political risk that has to do with  
4 Congress voting down the nuclear industry.

5 Five years ago that would be considered sort of  
6 inconceivable, but now it is conceivable.

7 DR. WILSON: That is the standard, in a sense.  
8 That distinction is not much different -- on the second  
9 type of risk is the sort of decision analysis that has been  
10 taught at Harvard Business School for some years.

11 I mean, that's the standard business risk. And the type  
12 of risk that we're talking about, risk to life and limb, is  
13 a different one.

14 DR. PAGE: I should keep those separate.

15 DR. WILSON: Yours is an older type. Businessmen  
16 are taught to face that type of risk.

17 DR. PAGE: Maybe I wasn't clear enough in  
18 separating the two.

19 DR. LAVE: Toby, you were being a little slippery,  
20 I think, talking about some of the asymmetries, particularly  
21 about the path or what is the probability of a chemical that  
22 was classified as a carcinogen now being exonerated versus a  
23 chemical that was not classified as a carcinogen now being  
24 classified.

25 And I think that your point is well taken. But one has

gshHEE 1 to be careful in applying the point.

2 In particular, I think it is extremely unlikely that a  
3 substance which was once classified as a carcinogen would be  
4 subsequently exonerated. Takes cyclamates, just for a  
5 couple of reasons. One, it is clearly an uphill battle to  
6 try and reverse it later on. That is the burden of proof is  
7 clearly on you to prove that it is not a carcinogen, which  
8 is probably an impossible task, as they are finding out with  
9 cyclamates.

10 And so, in general, there's no additional testing that  
11 happens.

12 Secondly, I think that there is always an natural path of  
13 some substance being not classified as a carcinogen. That  
14 is, if we have a new chemical come on the scene, of course  
15 it is not classified as a carcinogen until we get some  
16 evidence on it.

17 So that as evidence begins to accumulate, things will be  
18 classified as carcinogens.

19 I think in general your point is well taken about looking  
20 at the decision calculus. But the asymmetries are much more  
21 difficult to account for.

22 DR. PAGE: That is a good point. Basically, what  
23 you're saying is that not only do we have to worry about the  
24 discovery of these false positives and false negatives, but  
25 we also have to worry about the probability of discovering

gshHEE 1 them and the means of discovering them.

2 And I think that this gets down to sort of what I wanted  
3 to talk about, which is that when you start asking these  
4 kinds of questions and you start asking how can I better  
5 discover these previous past mistakes, and how can I better  
6 anticipate them in the future. And then we get into the  
7 design question a little bit. I'm sort of looking at the  
8 design question as sort of equivalent to trying to find out  
9 whether a new chemical is a carcinogen ex ante, because it  
10 is just hard to tell whether a chemical is a carcinogen ex  
11 ante, just as it's hard to know in Three Mile Island or in  
12 Brown's Ferry the cables were lined and they should have  
13 been separated.

14 After the fact, it is easy to see. But before the fact,  
15 it's real hard.

16 DR. WILSON: Isn't the problem there both in the  
17 carcinogens and in the reactor questions a problem because  
18 you haven't specified properly your boundary line?

19 Now I would like to take as a naive principle that  
20 everything is carcinogenic as a starting point and that they  
21 may be, even drinking water is probably carcinogenic, but  
22 very low potency. And it's just a question of amount.

23 If you take that starting point and ask yourself, what is  
24 the number by which you have potency or some such thing, the  
25 slope which Elizabeth Anderson was talking about where you

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had to reduce it to this particular discrepancy and it normally disappears.

*e-10'*

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1 In reactor safety, the same thing comes up. If you  
2 are trying to say that something which appeared to be safe has  
3 now proved to be unsafe, do you always find that was the case?  
4 We would always find something starts by being safe, but it  
5 has never been in use. There's no experience with it. And  
6 then it automatically becomes unsafe the first time it fails.

7 So if you start again with the viewpoint, which I  
8 think in reactor safety we tend to start with, that any  
9 gadget is potentially unsafe, it is a question of the level  
10 of the failure level at which you begin to start worrying about  
11 it. And again, I think that particular problem disappears  
12 because it is -- I am essentially arguing for always putting  
13 upper limits on something when you don't know it, rather than  
14 just saying it is not there.

15 Does that sound right?

16 DR. PAGE: I think there is a lot of sense in what  
17 you are saying. I don't know -- I don't know whether -- I  
18 mean, the impression -- you see, I guess I'm just trying --  
19 I'm sort of being swayed by this Three Mile Island report.  
20 The sense that I got is that people in the industry had the  
21 feeling that nuclear power plants were safe because there had  
22 been no accidents that involved people for a long time. And  
23 so there was a certain sort of complacency within the industry.  
24 And when an outsider said, we have to make these plants safer,  
25 then the reaction was, well, they're already safe and there's

1 nothing that can be done.

2 But in reading the Three Mile Island report, it  
3 sounds like there are all kinds of ways they can be made  
4 safer. Some of these ways are at low cost, and they arise  
5 because we've been looking at just one aspect or we have been  
6 concentrating on one aspect of the problem and neglecting  
7 other aspects, which are sort of up for grabs.

8 There is a lot that can be done because it has  
9 been relatively unexploited, and that is in the design side  
10 and the training side. So I look upon that sort of as an  
11 optimistic, hopeful --

12 MR. LAVE: Although there is another point. TOSCA  
13 was an attempt by the Congress to switch the burden of proof  
14 of trying to correct bad situations that had occurred and  
15 trying to prevent situations that did occur, as was OSHA.  
16 And getting back into your basic framework, whether it makes  
17 sense to go for prevention rather than early detection  
18 depends upon what is the cost of prevention versus the cost  
19 of early detection.

20 And if it turns out that -- suppose it turns out  
21 that one chemical in 10,000 is a carcinogen. Then I think  
22 the judgment will have been wrong by the Congress and TOSCA  
23 would have been wrong from a social viewpoint. It would have  
24 been better to try and indulge in early detection, to count  
25 the few dead bodies that arise and say that's too bad, rather

1 than to go through the elaborate steps you're going through.  
2 And I think that part of what the nuclear people keep on saying  
3 is that they have always felt under the burden of prevention  
4 rather than early detection. So it is clearly cheaper and  
5 easier to find faults when you are engaging in early detection,  
6 rather than the prevention phase.

7           And it may be that part of what the Three Mile  
8 Island report does is to show that the nuclear people were  
9 searching under the light rather than looking at these other  
10 areas that they couldn't quite deal with, and may have been  
11 unaware that they were searching under the light.

12           DR. OKRENT: I wonder if I could turn the discussion  
13 back to the kind of thing that Richard Wilson was bringing  
14 up a little bit ago. Is there, in your opinion, some level  
15 of risk that is small enough that if you know it with some  
16 degree of uncertainty to be stated, this is acceptable for  
17 society to impose upon somebody who receives no direct  
18 benefits, as may well be the case for various of the chemicals  
19 that you are dealing with?

20           DR. PAGE: If we adopted an acceptable risk of one  
21 out of a million and everybody is dosed by this chemical, that  
22 means 220 cancers per year. It certainly seems to me that  
23 there are many kinds of chemicals for which this would be an  
24 unacceptably high number of dead bodies in order to get the  
25 benefit.

1           And I can think of formaldehyde and toothpaste as an  
2 example. If that raised the risk to one out of a million for  
3 the entire population, it just wouldn't be worth it to get  
4 that nice, stingy taste in toothpaste. There are other ways  
5 you can do it.

6           I think there are times when one out of a million  
7 risk is far too high a risk. On the other hand, I think you  
8 can probably easily think of situations where we as a society  
9 have been willing to live and appear to be willing to live  
10 with a risk of one out of a million or more than that, because  
11 the benefits seek high in comparison.

12           DR. OKRENT: If I can paraphrase what you just said,  
13 the one in a million multiplied times 200 million --so this  
14 is where everyone is exposed -- imposes a large enough  
15 societal cost that there should be some benefit that  
16 justifies this. If there were a limited number of individuals  
17 exposed to the one in a million -- let me say a million  
18 instead of 200 million -- would that change your conclusion?  
19 Or 100,000? Or is there some -- would you be willing to say,  
20 well, 100,000 have this exposure, but the rest of society is  
21 much, much lower?

22           And then, would you still look strongly -- I'm just  
23 trying to see, is there some number that is low enough that,  
24 if the total societal burden isn't large, from an individual  
25 point of view you would think it was all right?

1 DR. PAGE: Well, I think the total number exposed  
2 is certainly an important consideration, and also whether or  
3 not -- if the exposure is voluntarily assumed. I think that  
4 is an important consideration. And if the market in which  
5 the risk is assumed voluntarily, if it is a good market and  
6 with well-informed people and people who are getting hazard  
7 pay and that sort of thing, then that -- and the market is  
8 really working and people aren't forced into it because they  
9 happen to live in Appalachia.

10 DR. OKRENT: But generally speaking, we're talking  
11 about places where people are ill-informed and it may not  
12 even be well known.

13 DR. PAGE: Well, I think these are all parts of  
14 what you mean as to whether something is acceptable or not.  
15 I think a risk that is imposed from one generation to another  
16 generation is different, because it has equity aspects to it,  
17 from a risk that is imposed by one person to himself as he  
18 drives his car down the highway.

19 Because of these things, I think it may be a mistake  
20 to get a simple number, and it may make more sense to, first  
21 of all, to try to figure out what the ingredients are and not  
22 just a shopping list, but how they actually interact, one with  
23 the other.

24 But I don't think that is where the real payoff is.  
25 I think where the real payoff is is in trying to make the

1 incentive system work better, so that some of these choices  
2 aren't quite as imposed and nasty as they appear to be now.  
3 What I'm saying is that it appears that there is a lot of give  
4 in the system that could be exploited if we were to attend to  
5 the level of incentives and institutions, as opposed to  
6 accepting the menu as given and then deciding whether or not  
7 we're going to live with it, up or down.

8 DR. WILSON: The incentive system working better  
9 is something which I think most of us feel very strongly about.  
10 It is important. But there has been very little achievement  
11 of that aim. When you set a standard, it tends to be set in  
12 concrete, and then all incentive is just absolutely stifled.  
13 So the real question is, how can you achieve that? I mean,  
14 do you set a standard which can be moved up and down by some  
15 sort of procedure every few months -- or every few years, I  
16 mean -- if more data comes in, has a procedure for reviewing  
17 it?

18 And, associated with that, should you set a  
19 standard, an extremely tight one if you have no information  
20 at all and we just don't use the chemical; and then gradually  
21 relaxing as you get more and more information? I mean, at the  
22 moment -- well, it's not quite true. But in many cases we  
23 have no regulations at all if we have no information.

24 DR. PAGE: Well, I think these are the right kinds  
25 of questions to ask. And in the chemical field, for example,

1 we have some of the same problem as you have in the nuclear  
2 field, where a lot of the regulation is done by industry and  
3 reported back to the central government, and the central  
4 government accepts, is in the position where it almost has  
5 to accept the word of the industry that these things have been  
6 done, whatever they are.

7 The situation in testing, the industry does its  
8 own testing of chemicals and the validation of tests. The  
9 incentives to do a good test rather than a bad test right now  
10 are backwards, in the sense that you have a better chance of  
11 getting a chemical accepted if you do a bad test.

12 Now, how are you going to turn this around? Well,  
13 double-blind testing, validation of testing, strict liability  
14 for the tests, and such, like the SEC has rules that hold the  
15 officers of a company accountable for bad information submitted  
16 in the financial data.

17 You can begin to think about what kinds of institu-  
18 tional mechanisms might lead to better tests and validation  
19 of the tests. And we might get out of this awful position  
20 of going and finding that enormous numbers of tests on  
21 pesticides are worthless.

22 DR. WILSON: Well, the ones you have described to  
23 us are one which are in a regression of a never-ending  
24 sequence of checks and checks, and not automatic feedback  
25 systems. I mean, I would like to have an automatic feedback

1 so you could connect the loop once, and then it automatically  
2 stabilizes. At present the loop is completely unstable, and  
3 we have to put stop points here just to stop the whole thing  
4 from going to pieces.

5 And you are just -- the list of things are just a  
6 bunch of stop points and not a system to make it basically  
7 stable.

8 DR. PAGE: Although a third part of the testing  
9 scheme could have this feedback, where you end up paying people  
10 off or being bountyhunters, essentially.

11 DR. WILSON: That is why I like the idea of something  
12 being automatically treated dangerous right from the beginning,  
13 and there is some level of risk which you can accept, and then  
14 you can go away from that level by doing more and more tests.  
15 And then you climb up to here. And you might then say, well,  
16 no matter how safe it is, we can't do it.

17 DR. PAGE: Another example of this is in the design  
18 of the tests. The safe dose may be coupled to essentially, to  
19 the confidence level, the error bar in the result. So you  
20 get rewarded for a sharper test. And that was one of the  
21 motivations for the technique back in the beginning.

22 DR. OKRENT: Other questions for Dr. Page?

23 We have been more than generous in posing questions.

24 (No response.)

25 DR. OKRENT: Well, thank you. You are welcome to



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1 sit down around the table. We are going to have some general  
2 discussion, and you may join if you are so inclined.

3 The thing I would like for us to do at this point  
4 is to get comments from our consultants in particular on what  
5 would be fruitful things to do, assuming that we still have  
6 a goal of trying to develop some kind of possible approach  
7 to quantitative risk acceptance criteria that we could present  
8 to the full Committee, that they might buy, that they could  
9 present to the NRC for consideration.

10 I think I have indicated that the Commissioners  
11 themselves have now indicated that they feel a need to move  
12 in this direction. And I think we heard from Mr. Von Thun  
13 that there are others who are moving in this direction. We  
14 see that, for its problems, EPA is developing approaches.

15 Who wants to start the discussion?

16 DR. WILSON: One thought to me is that the biggest  
17 single gap at the moment -- and I don't know how to fill it --  
18 in thinking of how one might use -- there are some cases  
19 where one can obviously, explicitly or implicitly, use risk  
20 assessment, is -- and it is both a gap and a characterization,  
21 and incentives -- is after you've thought about reactor  
22 safety, how do you make sure? Because almost certainly,  
23 somewhere in there there is something cheap you can do to  
24 make reactors safer, and on any cost-benefit ratio it will be  
25 cheaper.

1 I don't know what it would be. If I knew what it  
2 would be, I would have told somebody what it would be, and it  
3 would be done.

4 And the question is -- the interesting question is --  
5 I was thinking of an analogy on the radiation things of the  
6 20s, when all of the medical people were saying: Here are  
7 medical X-rays. The diagnosis we can do with them is so  
8 beneficial that it hardly matters to us what the risk is; and  
9 the benefits are so huge, we should go ahead and do them.  
10 And there were one or two people whispering from behind the  
11 closed doors, where they had been pushed off to the side: Yes,  
12 but you can probably get the same benefit with much less risk  
13 by using sensitive film and not covering off the parts of the  
14 body, and all of those things we know about now and we all  
15 know of.

16 We've got the exposure factor. It took a long  
17 time, about 30 or 40 years, to get that point across. And I  
18 think the major thing we're talking, we're trying to get  
19 across, is how to get that aspect of looking at those unknown  
20 things.

21 DR. OKRENT: Well, I would suggest that you could  
22 have an ALARA and I have said an AGARA, as good as reasonably  
23 achievable, criteria. In other words, you may have to meet  
24 some limit. Whether it's a non-acceptance limit or an  
25 acceptance limit, I don't know. But after that, you could

1 say you would still have to make such other improvements.

2 DR. WILSON: But that is if you think of them. It  
3 is the forcing -- I mean, some of the improvements of Three  
4 Mile Island, for example, that the Kemeny Commission report  
5 comes out with are so obvious to us now. It is unclear to  
6 us -- I mean, if anybody really thought about them as clearly  
7 as we now think about them, they certainly would have got done.  
8 But nobody did.

9 And I think that is the biggest single gap.

10 DR. LAVE: Well, Dave, I think that the problem is --  
11 or at least the problem as I see it -- is that asking the  
12 question of what is an acceptable risk criteria is not going  
13 to be a fruitful way of proceeding; that part of what Dick  
14 was just saying and part of what Toby Page was telling us a  
15 little while ago, and part of what Skovic has, and I think  
16 that very nice piece that was included, is that there are a  
17 whole set of other concerns, that it is not quite as simple  
18 as deriving a single number.

19 I mean, here in the last few minutes we've been  
20 talking about uncertainty and how it is that one could reduce  
21 the uncertainties surrounding any risk. We've been talking  
22 about feedback mechanisms. We talked at the first meeting  
23 about verification of risks, that is, if you have some  
24 estimate, what in the world does that really mean? Can anybody  
25 really believe it?

1           We have been talking about benefits.   And it seems  
2 to me we have a whole nexus of problems that are just too  
3 complicated to be expressed in what is a single risk number.  
4 I guess if I were being a little bit playful, I would probably  
5 answer the question you posed to Toby by saying: Well, I guess  
6 that  $10^{-20}$  is a risk that I would accept, even though it was  
7 of no benefit to me, if I was absolutely sure that it was no  
8 greater than  $10^{-20}$ . Now, are you happy because I have given  
9 you that number?

10           I mean, I think not. I think that the number is  
11 surely going to be high enough so that the costs that are  
12 associated with achieving it are going to be out of all bounds.

13           DR. OKRENT: Well, to answer your direct question,  
14 I would say no, your proposed number I would find to be  
15 unacceptable.

16           By the way, I did not say there should be a single  
17 number. I don't think you heard me urge that there should  
18 be criteria that involves a single number. And I am not  
19 proposing that there be criteria that are independent of  
20 benefits or whatever.

21           I am asking, though, if one is going to try to  
22 develop risk acceptance criteria which are quantitative in  
23 nature and which include whatever other aspects they should,  
24 because that's part of the framework in which they are cast,  
25 how should we go at it and what is a possible approach, or

1       however you want to put it?

2                       So I choose not to set up that straw man of a single  
3       number and knock it down. I could, also.

4                       DR. LOWRANCE: I gather when you say "risk  
5       acceptance criteria," what you mean is criteria that would  
6       be useful in managing the future of nuclear power, or at least  
7       the reactor side? Is that what you really mean by, quote,  
8       "risk acceptance criteria," close quote?

9                       DR. OKRENT: Well, it obviously could mean different  
10       things to different people. We heard Mr. Von Thun earlier  
11       mention that they are beginning a process of trying to lay  
12       out for top level of management in what was the Bureau of  
13       Reclamation, which now has a new name I cannot remember, what  
14       their best estimate is of the risks. And they also have  
15       comparative risks of different approaches and so forth.

16                       So when they make a decision, this is part of the  
17       information. But they clearly included the fact, at  
18       Jackson Lake, that this was not a body of water with no  
19       benefits. There clearly were benefits associated with this.  
20       And so, they in fact were buying risks under any of the  
21       approaches, even the one that was nominally not a risk for  
22       failure mode one, but there still was a failure mode two.

23                       I think in fact one can argue from today 'til  
24       tomorrow, as it were, about how hard it is to develop risk  
25       acceptance criteria. The regulators, the people who build

1 things, are still going to build things that are imposing  
2 risks, or standards that impose risks. And my own feeling  
3 is it is better to have them laid out as clearly as you can,  
4 either as Von Thun said or as we are seeing the EPA is trying  
5 to do, and, let me say, as the NRC should try to do. And they  
6 can say: Look, this is what we're trying to achieve. And  
7 they may have to say: This is what the best estimates are,  
8 and these are the uncertainties, and here are the residual  
9 risks that will exist if and when they meet the design criteria  
10 the way we think they should be. And it is presented as the  
11 total package of what we mean when we say these reactors can  
12 be operated without undue risks to the health and safety.  
13 And if you the Congress think that is wrong, tell us what  
14 you think should be different; or if you the public, or however  
15 it is.

16 It would seem to me that would be preferable. In  
17 fact, it might have averted a lot of the difficulties that  
18 exist today. Not all and not some of the technical issues,  
19 but you could still omit some of the technical factors.

20 I don't want to mix two different questions. How  
21 do you treat design errors, about which I've been worried for  
22 many years. It's not that I think they are unimportant, but  
23 I don't want to mix the two things.

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pv HEE 1

2 DR. WILSON: There are about two or three places  
3 where it seems to me that one should be able to develop over  
4 a period of time places in NRC where risk calculations  
5 should be useful. First, it is not clear to me, if you  
6 develop a standard for anything, that a risk calculation is  
7 necessarily explicitly, although it should be done  
8 implicitly.

9 I mean, we talked about these standards EPA is  
10 developing. Elizabeth Anderson never mentioned that this  
11 was calculated solely on the mathematical equation going  
12 from a risk calculation to the standard. And in the same  
13 sense, the radiation standards, of course, are the oldest  
14 ones. And in a very real sense, all of the criteria which  
15 the EPA has talked about have already been identified by  
16 ICRP in setting the radiation standards, of compatibility  
17 with the background, and a rough calculation of risk on the  
18 linear hypothesis, and small increments -- all of those  
19 things are in there.

20 So, although -- and they are not explicitly  
21 mentioned in the standard-setting pieces of paper or -- in  
22 fact, the only words on the application of them are these  
23 words "as low as reasonably achievable, economic and other  
24 factors taken into account," and all of those nice phrases  
25 that get added onto the standard.

So, I think it is important to emphasize that a

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1 risk calculation procedure should be backing up a standard  
2 and sort of be implicit behind it even though it is not  
3 explicitly used in the standard.

4 The other places where some calculations of risk,  
5 calculations of benefit, and maybe even comparison of risks  
6 and benefits might be important, are the continual tasks  
7 that the NRC gets on what it does when it suddenly gets a  
8 new piece of information which is important for the question  
9 of whether the present 72 reactors should stay on line or  
10 maybe a subset of them, those General Electric boiling water  
11 reactors or even those boiling water reactors which don't  
12 have the special jet pumps.

13 Now, every now and again a piece of information  
14 comes up which one hadn't expected. I was thinking,  
15 particularly because it affected us locally and affected my  
16 personal electricity bill, of the shutting down of reactors  
17 this spring because of earthquake hazards. Now, earthquake  
18 hazards are not something very amenable to risk assessment,  
19 of course. Nonetheless, we could have made a sort of rough  
20 estimate on it, and I am not sure one was done.

21 But I tried to think about it a little bit myself  
22 because while I was suffering the pain of increased  
23 electricity bills, the question came: should one, for  
24 example, shut down after two weeks, give them two weeks? I  
25 mean, what is the risk of — granted, it is a thing you

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pv HEE 1 really want to look at this question carefully, you want to  
2 put incentives to have someone look at it quickly, is  
3 shutting down the whole reactor too much of an incentive or  
4 just a "fix it and give us some information in two weeks'  
5 time or we shut down." Presumably, that could be addressed  
6 by risk calculation.

7 DR. OKRENT: I agree with you. In fact, there --  
8 in our letter of May 16, in its second sentence, said,  
9 referring to quantitative safety goals, "This could be  
10 helpful, for example, in developing criteria for NRC actions  
11 concerning operating plants."

12 So, we are conscious of the possible use of such  
13 criteria. And I don't think the NRC staff now have a  
14 yardstick. So, even if they had a yardstick, it might  
15 encourage them to see are they able to measure against the  
16 yardstick, which you cannot always do. But in that  
17 particular case, they might have been able to.

18 DR. WILSON: Well, again, it is the uncertainties  
19 in the calculation that have to be brought in. In  
20 earthquakes, the uncertainties are huge. But nonetheless,  
21 it was clearly a case that the retrofitting -- you know, it  
22 is again -- the retrofitting clearly is not because they  
23 won't -- couldn't stand an earthquake at all. It is because  
24 if the calculations were wrong, they wouldn't stand quite  
25 such a big earthquake as they were designed for. And things

pv HEE 1 of this sort could all go into it.

2 So, I think those are quite important financially,  
3 and the things I am most interested in, however, I think, we  
4 ought to try to find methods of using a risk calculation to  
5 simplify the regulatory process. And that, I think, is  
6 perhaps one of the most important things -- not necessarily  
7 major regulatory processes, but -- and that then has to be  
8 done in what one would, as scientists say, in a form where  
9 there is a negative feedback so the incentive is automatic.

10 One of the problems with one place where it is  
11 brought in in the standard after the slowest practicable  
12 nearing was the statement that "if you can reduce the  
13 exposure for" -- what is it -- "a million dollars a man-rem,  
14 then you should do so."

15 There are no particular incentives in there. It  
16 didn't replace any of the other low-level radiation things.  
17 It was added to.

18 One might, for example, talk about such criteria  
19 if on the following basis -- I am not sure it was the right  
20 one, but it was the one I thought about for that particular  
21 -- it is going back on something which has been done in a  
22 similar criteria one might say instead of setting 10  
23 millirems per year at the site boundary for the criteria,  
24 set an absolute maximum of 100 millirems combined with a  
25 mandatory regulatory measurement of calculation of what the

pv HEE 1 dosage is, a mandatory charge at the base of a million  
2 dollars per man rem to give automatically not only a demand  
3 that he reduce but a financial incentive -- something of  
4 that general approach.

5 But is a combination. It is placing the mandatory  
6 standard which can produce a lot of work on that  
7 regulation. If you go down to 10 millirems and forcing the  
8 tech specs and you would reduce the amount of work, and we  
9 would have a simple procedure, which is simpler for a  
10 variety of reasons. One, it is the only regulatory -- part  
11 of it is subsequent to the event and not before the event.  
12 Those are the only general ideas that -- I am not sure that  
13 is workable in that particular case.

14 DR. OKRENT: Well, I like the idea of a risk tax  
15 which, in effect, is what you are saying.

16 DR. WILSON: Right.

17 DR. OKRENT: I don't know whether that is part of  
18 a framework for risk acceptance criteria where there is a  
19 question of risk management. In my own mind, they are  
20 related, but in a slightly different box. But I am  
21 open-minded.

22 I am trying to encourage you all to think  
23 positively. I think the community or too long has been  
24 trying to point toward all the difficulties in developing an  
25 approach, and I think it is time to --

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2 DR. WILSON: Well, I think the important thing  
3 about any positive statement is this: that I am always  
4 worried when someone says this is too uncertain to do a risk  
5 analysis -- because that is usually the case -- where I  
6 would like to see someone attempt a risk analysis more than  
7 any other case.

8 DR. OKRENT: I agree.

9 DR. WILSON: It's not because the number is going  
10 to be reliable or it's not going to be extremely uncertain.  
11 But until someone has attempted a risk analysis, set the set  
12 out, I am not even sure he has thought about the problem.

13 DR. OKRENT: I agree.

14 Bill, do you have anything?

15 DR. LOWRANCE: I am concerned with knowing where  
16 to take all of this. I have been troubled today as I was in  
17 the previous session. It seems to me that the most  
18 difficult aspect of all of this or one of the most difficult  
19 parts is not at the early end of how one describes the  
20 physical risks and comes up with some probabilities and  
21 consequences and one tries to bound the uncertainties and so  
22 on, but the "so what" question -- how does that then imply  
23 social action and management decisions or cutoffs or upper  
24 limits or lower limits or whatever.

25 And you just heard Dick say that systematic  
approaches should be used more in developing and backing

pv HEE 1 regulatory decisions, say, by the NRC. That sounds fine.

2 But then the question is: for any newly  
3 discovered hazard -- let's say, within the reactor -- at  
4 what point, at what marginal return, do we then ignore the  
5 new signal or at which point do we start taking action? We  
6 just danced around that question all day and, yes, the  
7 Bureau of Reclamation is doing systematic risk analysis,  
8 but it is not really looking at the "so what" point, at what  
9 point you stop building those big dams.

10 And as I said in the last meeting, I think if  
11 people really knew what the hazards of those big dams are  
12 and when a big one finally goes -- I mean, a really big one  
13 finally collapses and kills one of the expected communities,  
14 100,000 people or so -- that whole complexion is going to  
15 change. We're no longer going to be able to sit back and  
16 say, "For years the Bureau of Reclamation and others have  
17 been doing their analyses, and it is all working out well  
18 and we ought to do that in the nuclear area."

19 I don't know if any major technological area has  
20 ever done this and done it in an open way so there would be  
21 scrutiny and fairly informed knowledge -- not by the general  
22 public, whoever that is -- but by the decisionmaking  
23 public. I am just not sure how we got onto that point.

24 DR. OKRENT: There is a member of our audience.

25 MS. HALLER: Agnes Haller, of Babcock & Wilcox.

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2 I came across this study not too long ago that was  
3 done by the Canadian Atomic Energy Commission. It is a  
4 report -- whose number I don't happen to have with me --  
5 regarding the comparisons of energy sources and their  
6 risks. And it traces everything -- coal, nuclear,  
7 photovoltaic, any source that we might be considering for  
8 major production use -- through the mining and source,  
9 obtaining the source of the material to construction to  
10 production, all the way to waste disposal.

11 And I would like to recommend the report to you as  
12 a possibility for background information.

13 DR. OKRENT: Thank you. I think you are probably  
14 referring to what is called the "INHAB Report," around which  
15 I guess there is some controversy about the results.

16 MS. HALLER: I am sure there are questions, but it  
17 is a methodology that I thought would be useful.

18 DR. OKRENT: Dr. Shinozuka.

19 DR. SHINOZUKA: If I may, I would like to talk  
20 about problems associated with hardware in the nuclear  
21 problem. This causes a discussion away from acceptable risk  
22 criteria, but I think I would like to lead to that end of my  
23 comments.

24 Could we -- the power plant consists of electrical  
25 systems, structural systems, warehouses for the electrical  
26 system and the control system. The mechanical-electrical

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pv HEE 1 system obviously might become an initiating event of a very  
2 many number of possible event trees. At the same time, it  
3 will induce in some cases structural failures.

4 Now, when we look at the structural system, it  
5 might fail due to natural hazard, notably by earthquake.  
6 And by doing so, that is structural failures and that in  
7 turn induces failures of mechanical systems.

8 If you look at control systems, including the  
9 engineered emergency safety systems, if they fail,  
10 definitely they will induce all kinds of problems.

11 To make a long story short, all of these will  
12 definitely increase the possibility of radioactivity  
13 release, if not definitely lead to it.

14 I see three basic problems which have not been  
15 really dealt with carefully, dealing with these systems:

16 Number one, the interactions of these failures are  
17 not well understood at this time. For instance, if an  
18 earthquake hits, what is the probability that the control  
19 system fails, which will in turn increase the probability of  
20 failure of certain mechanical and structural systems? These  
21 are not well -- this problem has not been very well  
22 addressed.

23 Number two, human factors, particularly human  
24 errors in terms of design situation or operating  
25 situation. This is an important aspect which we really have

pv HEE 1 to systematically deal with. And I don't think I have seen  
2 really a systematic approach to deal with human factors.

3 Finally, uncertainties in evaluating particularly  
4 structural and mechanical system behaviors are really,  
5 really wise. I think we really should make an effort -- and  
6 when I say "we," I mean the general engineering profession  
7 -- should make an effort to, if not of course eliminate, to  
8 reduce the, let's say, confidence associated with such  
9 uncertainty.

10 I think all of these problems must be looked into  
11 systematically before we can really come up with estimates  
12 of probability of, let's say, radioactivity release of a  
13 specified amount, which are needed, I suppose, for the  
14 ultimate risk assessment we are talking about. These are  
15 some, I would say, practical implementable suggestions I can  
16 offer right away with the engineering community.

17 Of course, probably we will have to have some  
18 research funding to receive these researches, to see that  
19 they be implemented. But I think that that is really  
20 important. That is what I would like to say.

21 DR. OKRENT: Well, let me not comment at the  
22 moment. I agree with much of what you said.

23 Bill, you had your hand up.

24 DR. LOWRANCE: I would just like to raise my own  
25 continuing concern, and that is the question: was the Three



pv HEE 1 Mile Island accident a surprise to anybody who had been  
2 involved in the WASH-1400, Rasmussen study, and all of the  
3 modifications made since, the Lewis follow-up and so on?  
4 Was that accident fairly within the assessment fully at hand  
5 within the industry and the regulators? Or was it some sor  
6 of total surprise?

7 My guess, to answer the question a little bit, is  
8 that some subparts of it were surprises to lots of people  
9 and were not fully anticipated by the formal analysis; but  
10 overall as a huge machine most aspects of it seem to have  
11 been within the boundaries within the limits that had been  
12 drawn around the system before -- in the before-the-fact  
13 analyses.

14 So, then, I ask myself, "Well, so what? Do we  
15 need to do any more studies if we are getting better and  
16 better at the Rasmussen-type studies? That is, how will the  
17 machine behave and then adding operator error and better  
18 management of accidents and emergencies and evacuations and  
19 things of that sort? Or is there something else really  
20 fundamentally wrong with all of this?"

21 And it may be then that that is, when I am driven  
22 to sort of thinking about the effect of an accident in this  
23 case where no one was killed outright, is that what we ought  
24 to be worrying about? And how do we accommodate that  
25 balking effect, the fact that it is terribly disruptive

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1 because it started down a very serious branch of the fault  
2 tree? Is that effect something we ought to be worried about  
3 more? And how do we do that? How does formal analysis help  
4 us with that?

5 This is just a large question I am just trying to  
6 raise that is somehow wandering around in my mind.

7 DR. WILSON: That brings up something that I did  
8 not include in my list of issues. But I think it can help.  
9 And that is: as a partial comment on that and also a  
10 partial comment, I think certainly I was expecting something  
11 the size of Three Mile Island to be coming up any time. I  
12 was hoping I was wrong.

13 But I must say I have read Rasmussen's report,  
14 and, of course, it wasn't exactly what was predicted by it  
15 in any way, but many people in the industry had not expected  
16 it. I mean, they really thought Rasmussen was rather  
17 pessimistic. And so, in that sense, it was a shock.

18 The other thing is also true: that as I think  
19 about it, what did the Rasmussen report do, and how could it  
20 be used? It was used incorrectly by two sets of people:  
21 incorrectly by the Commission and the industry in saying  
22 reactors were safe; incorrectly by intervenors who were  
23 saying it's a bunch of nonsense. But really, it was a rough  
24 assessment of where the industry was at.

25 But what it was not used as was a set of things

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1 which reactors are that safe if you follow these  
2 procedures. And you look at this very carefully.

3 So, there is one set of things where I hope  
4 something must have been done where the risk analysis is in  
5 fact being used and it should be used. It wasn't before  
6 Three Mile Island. And it was recommended by the Lewis  
7 committee and everybody.

8 And so I think we should continue to realize it  
9 both in itself and all its ramifications, and that is if  
10 Herbert Dekamp and his staff had read the 82 sequences of  
11 the water reactors that Rasmussen went through and said,  
12 "Well, I wonder how this Westinghouse sequence applies to  
13 the Babcock & Wilcox reactors," it is inconceivable to me  
14 that they wouldn't have realized that this particular  
15 sequence is a thousand times more probable in the Babcock &  
16 Wilcox reactors. It's not inconceivable to me that in that  
17 case they'd do one of two things: certainly, alert people;  
18 and, if not -- and badder still, it was not done until May,  
19 which was just the set point of all of the things, so it  
20 didn't happen so frequently.

21 Those aspects of risk analysis seem to me in  
22 management of industry, seem to me more important. That  
23 approaches the question I was saying that one of the points  
24 of doing risk analysis is to guarantee someone has thought  
25 through the problem. And in fact, one of the things that

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1 Three Mile Island showed is that the particular staff had  
 2 not thought through the problem, and this I had hoped: that  
 3 if you have a thing like the Rasmussen report, 82 sequences,  
 4 it is not that much work to ask everyone of the trained  
 5 operators in the simulator training to think in terms of  
 6 what do you do if that happens.

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1 DR. LAVE: That's a good point. But I think there  
2 is one thing there that might be unfortunate. Three Mile  
3 Island does not serve to disprove the Rasmussen calculation,  
4 but neither did they serve to prove them. That is, they are  
5 simply consistent with them, and one cannot say, aha, since  
6 Three Mile Island was consistent with them, therefore  
7 Rasmussen was right and various other people were wrong.

8 But let me try and be positive. Using that and  
9 what the other people have said to try and be positive --  
10 and Dave, I'm sorry. I was reacting to some of the questions  
11 you were posing to speakers, which is why I was trying to ask  
12 you whether you had stopped beating your wife.

13 DR. OKRENT: Well, I did not feel it fair to push  
14 any of the speakers except Toby Page on the question of  
15 quantitative risk acceptance criteria. But I feel it is fair  
16 to push you all.

17 DR. LAVE: Well, let me try and do that. Trying  
18 to react in the spirit that you posed the question, I think  
19 that we know enough now to know that the framework in which  
20 that question has to be posed is more complicated perhaps  
21 than had been realized by the NRC at the beginning of the  
22 study. That is, it has several aspects about it which we now  
23 know to be important. And let me just put a couple of them  
24 down.

25 That, first of all, estimating risks without being

1 able to verify the levels of those risks is almost a  
2 meaningless exercise; and that probably at this point the  
3 most important aspect of risk assessment for the nuclear  
4 reactors has to do with some attempt to verify what those  
5 probabilities are, and not simply to make them larger or  
6 smaller or whatever it is.

7           Secondly, we need to know much more about the  
8 residual uncertainty once the risks have been estimated and  
9 verified to the extent possible, and that magnitude of resi-  
10 dual uncertainty has to do both with the unverified part of  
11 the risk, since most of the risk will necessarily be unveri-  
12 fiable -- but we're also looking beyond that part.

13           The third part is what Dick has just been stressing,  
14 which is we need to worry about a different framework in  
15 which nuclear reactors are operated, so that reactor operators  
16 are motivated to think about whether it is worthwhile to go  
17 to the Rasmussen sequence or some other sequence, or worry  
18 about whether the level of training is correct or whatever  
19 it is; that is, that the incentives are properly placed so  
20 that somebody other than the NRC Commissioners are worrying  
21 about all of this in detail.

22           However smart the NRC is, it can never approximate  
23 the amount of smartness represented by all of those people  
24 out there in the field operating reactors every day, who, if  
25 properly motivated to worry about the right kinds of

1 problems, are going to do a much better job than the NRC  
2 staff could ever possibly do.

3           So you want to get the incentives right. And then  
4 the last part of that is that any notion of acceptable risk  
5 is necessarily tied to some notion of the benefit that you  
6 are getting from looking at that risk, which not only has  
7 to do with the distribution of the benefits and the distribu-  
8 tion of the risks, but also the overall benefit. And in this  
9 case, that really comes down to what is the cost of a kilowatt-  
10 hour foregone or the cost of a kilowatt-hour generated by an  
11 alternative to nuclear power, such as coal.

12           And I think only by getting estimates of all of  
13 these things and by looking at the parts of those estimates  
14 that one can verify, can one begin to get this answer of what  
15 then is acceptable, what should design or operational criteria  
16 be.

17           DR. OKRENT: I must say I agree that the points you  
18 raise are relevant. I think we discussed them before at  
19 previous meetings, well before the ACRS got involved in this  
20 specific activity. And we are very conscious of the problem  
21 of uncertainties. In fact, to me the problem of the uncer-  
22 tainties and your inability to be confident of what we can  
23 predict, unless you're willing to talk about relatively high  
24 risk levels, is a big impediment in this whole thing.

25           Maybe I'm wrong in trying to divorce what I will

1 call risk management from risk acceptance, because obviously  
2 you all think it should be there. I am not opposed to it.  
3 Remember, Whipple and I wrote a paper in this area. I thought  
4 that maybe life would be simpler if we left it out. But what  
5 you tend to be saying is that you shouldn't be leaving it out,  
6 you should have it in there somewhere. And I am perfectly  
7 willing to be open-minded in that regard.

8 I should note, we started a little bit of our own  
9 effort, although it is a small effort. In fact,  
10 David Johnson and Bill Castenberg have been asked to try to  
11 give their estimates as to what extent did they think we could  
12 produce estimates of the individual risk from a nuclear plant,  
13 with what degree of uncertainty, or something that they would  
14 be willing to defend, even subjectively. But that is a small  
15 effort.

16 So, having said that, I want to come back to you in  
17 a minute and say, now what do we do. But let me call on  
18 Toby Page.

19 DR. PAGE: I wonder if this would be an acceptable  
20 dichotomy, that when you are worried about assessment of risk  
21 in sort of a descriptive sense, in trying to figure out what  
22 the probabilities are -- that sounds sort of like what you  
23 were pressing me on and other people, in terms of trying to  
24 describe the nature of the risks as they are. But when we  
25 begin to ask questions about what is acceptable or what is a



1 reasonable risk, what are the criteria for risk, then we're  
2 really beginning to get into the normative questions. And  
3 when we get into these questions, the amount that we can change  
4 the risk by having incentive systems and institutions this  
5 way rather than that way becomes an important part of calculus,  
6 to decide what we're going to live with.

7           So that's one of the reasons why some of us are  
8 sort of fighting the idea that what you're calling risk manage-  
9 ment can be divorced from acceptable risk. If you said, let's  
10 try to divorce risk management from an assessment of risk as  
11 it exists today, then maybe we could sort of go along with  
12 that sort of dichotomy.

13           DR. OKRENT: By the way, I favor what I called an  
14 ALARA criteria, and I also, as I indicated, really favor  
15 something that is the equivalent of a risk tax.

16           But let me note, there are different ways of trying  
17 to get to levels of risk. One is to say, well, I will try  
18 to give the licensee an incentive. But the NRC could say,  
19 we will try to build nuclear plants underground. Maybe that  
20 way we will reduce the risk. They might be changing the  
21 cost by 50 percent, and I think that should cover it. That  
22 is a lot of money.

23           Society has to ask itself, is that where it should  
24 spend that much money, because you multiple it times a billion  
25 times X times -- so it is not something that I think the NRC

1 should do lightly, if it were to do it, or the Congress.

2 By the way, sometimes, to put myself in a little  
3 bit of perspective, I do another kind of calculation about  
4 effects of radiation, namely, what is the effect of nuclear  
5 war. And I come up with the effect on the U.S. of 100 million  
6 early casualties and 100 million delayed, in Rasmussen  
7 parlance. And if you change the probability of such a war  
8 by a thousandth of a percent, if you increase it, that is  
9 still  $10^8$  over  $10^{-5}$ . So it is  $10^3$  people expected value per  
10 year.

11 That is still a pretty big number, in fact. And  
12 who is there to argue that he knows what changes the proba-  
13 bility of a nuclear war by one-thousandth of a percent?  
14 Certainly even oil supplies, you could argue, fall in that  
15 category readily. So it is a tricky bit when you start trying  
16 to put everything in perspective.

17 DR. WILSON: I always like to argue in terms of  
18 bounds, because so much of the talk people have is -- can be  
19 bounded. The comments that Dr. Lave had and criticisms I have  
20 had on risk benefit analysis is no good, you're just kidding  
21 us, and so on, but you can't do this, that and the other --  
22 and they put up straw men and destroy them, because they are  
23 picking something which Lester Lave never said, and he never  
24 said the numbers were highly reliable. They said -- he  
25 said the numbers are this sort of magnitude if you calculate

1 them this way. I very much doubt whether that's zero and  
2 whether that's half a million.

3 And if you start putting bounds on it, you get  
4 things which people can't disagree with. I think when you  
5 do something of the same on acceptable risk -- I mean, you  
6 talked about  $10^{-20}$  and whether that was acceptable. Well, if  
7 I was being subjected to risk, it certainly is more acceptable  
8 to me to accept  $10^{-20}$  than to pay for a 15-cent stamp to  
9 complain to my Congressman. I mean, that is a very simple  
10 risk-benefit calculation. I mean, much more -- \$100 million  
11 per life is what I gain on that one, even with 15 cents per  
12 stamp.

13 So if one puts it in that ridiculous form, it  
14 becomes clear that some low level, like 10 to the minus --  
15 I don't know. In this case, I think probably  $10^{-10}$  could be  
16 argued in a fair form, in which everybody would agree, when  
17 you put it in a ridiculous form.

18 I even got Samuel Epstein to agree on the risk of  
19 carcinogens which is acceptable. But one goes by pointing  
20 out that saccharin -- one shouldn't bound waitresses serving  
21 in the cafes, because the risk is  $10^{-10}$ . Well,  $10^{-10}$  is what  
22 a critical risk analyst calls absurd, because it is small.  
23 But I think it is worth doing that, because that does give  
24 you a boundary point which is non-zero, and it immediately  
25 puts some of the things where you can immediately start

1 thinking at a certain stage. And then you have to do your  
2 thinking between a range of  $10^{-10}$  and  $10^{-2}$ , And  $10^{-2}$ , you  
3 say, look, if those reactors aren't safe at  $10^{-2}$ , well, you  
4 certainly will not build them.

5 DR. OKRENT: You know, society imposes risks of  
6  $10^{-2}$ , knowing them. They are doing it in Los Angeles now.

7 DR. WILSON: Per lifetime.

8 DR. OKRENT: No, per year, on seismically substandard  
9 buildings, pre-1933 brick buildings with no seismic protection  
10 at all. I think the probability, even after allowing for you  
11 being there half of the time and so forth -- and the people  
12 don't know. They have not been notified.

13 DR. WILSON: Well, we had  $10^{-3}$  in Canberra Island,  
14 as we heard in the previous meeting, and that's a pretty  
15 reliable number.

16 DR. GRIESMEYER: It is most likely not any smaller  
17 than  $10^{-3}$ .

18 DR. WILSON: I think it is in Everett, Massachusetts,  
19 where the LNG ships come in there, and the population density  
20 is bigger.

21 DR. OKRENT: Well, in any event, we need somehow  
22 to decide in some relatively short time what would be fruitful  
23 steps to take next. Now, it may be that the National  
24 Academy of Sciences group will hold a workshop in this area.  
25 I don't know. We probably won't know until next year.

1 DR. LAVE: Don't hold your breath.

2 DR. OKRENT: I'm not going to hold my breath in any  
3 event.

4 So again, I urge you to think positive.

5 DR. LAVE: Well, without volunteering to do it, I  
6 think one could set out a document which lists the structure  
7 of what would be required to get some answers to risk regula-  
8 tion and risk management, and then worry about how it is that  
9 you could fill in that structure in order to then get some-  
10 thing that was workable.

11 DR. MARK: I wonder, Lester, if you could say that  
12 again? Are you thinking of trying to -- you spoke of a  
13 structure -- make a pitch for plans you might make and the  
14 ways in which risk could be estimated, made available to the  
15 licensing or regulatory process, rather as Mr. Wilson was  
16 saying?

17 DR. LAVE: Yes, I think one could specify a  
18 structure which could wind up being a how to do it. Step  
19 one is blind, step two is blind. We need to know exactly  
20 these kinds of things, and these are how you go about knowing  
21 them, and these are the steps you have to take as you get  
22 from A to B.

23 DR. MARK: And these are the reasons why you should  
24 do it?

25 DR. LAVE: Oh, yes.

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1 DR. WILSON: This is sort of a manual for the people  
2 who are trying to do it?

3 DR. LAVE: Let me be careful in the reaction. I  
4 think the manual is the end product. I think for right now  
5 what one could do would be to set down perhaps three pages  
6 of what the outline of that framework looks like, and then  
7 from there start trying to figure out how it is that precisely  
8 which pieces of information are needed for each part of the  
9 framework, and then precisely how is it that you go out and  
10 get those pieces of information.

11 So that I think it is not something that could be  
12 written full-blown at this point, but I think one could put  
13 down the structure and start asking the questions at this  
14 point, which I take it is what the four of us are supposed to  
15 be doing.

16 DR. WILSON: I think the one thing that I find --  
17 different people work differently. But I find I can't ask  
18 the questions in any abstract way, without ever having tried  
19 to look at the specific problem. I always find me full of  
20 crazy examples about this, that or the other. But this is  
21 the only way I know how to think about it. And we could  
22 certainly set up examples of how one might address the  
23 question in certain specific examples that you have in the  
24 past.

25 I mean, this earthquake hazard thing; how one might

1 have gone about that decision of whether to shut down imme-  
2 diately, later, or something a little more logically than  
3 it seemed. It may have been done, for all I know. I mean,  
4 I wasn't -- I have got good lines into the NRC, but they're  
5 not that good.

6 DR. MARK: You haven't found any logic.

7 DR. WILSON: Yes. In general principle, logic is  
8 not to be found anywhere in Washington.

9 But the point is that one could presumably look at  
10 that and find some example and say that should apply to this,  
11 and try and build on that. That is the way I would go about  
12 doing that.

13 DR. LAVE: I think that's fine.

14 Let me say that I too like to have specific examples.  
15 But I like to see if I can put down a general framework first  
16 and then find out whether the general framework makes any  
17 sense by testing it with specific examples.

18 DR. OKRENT: I will be happy to see an approach  
19 coming from each end.

20 Let's see. Toby Page?

21 DR. PAGE: Well, just sort of picking up this thing  
22 we said a little while ago, in this general framework it would  
23 be nice to see a chapter on how you go about evaluating  
24 previous risk assessment efforts. What has happened is that  
25 a lot of probability assessments are made, and then -- I

1 don't know. I mean, I am an outsider, so I don't know. But  
2 my feeling is that they are not systematically evaluated and  
3 have a reality test run upon them. Maybe I'm wrong, but it  
4 seems to me that one very simple thing -- and maybe this  
5 cannot be done, I don't know -- is that if you take a report  
6 like the Rasmussen Report, which must have thousands of  
7 specific probability estimates buried here and there -- would  
8 this part fail and that part fail -- you go down this path  
9 and that path. Each one of these by themselves can't be  
10 tested.

11           However, if we have a bunch of these which are  
12 assumed to be independent, then we can add them up to a  
13 variable which you can observe. And by doing so, we can have  
14 two tests: One is whether or not the aggregate of these  
15 individual trials really adds up to what you would expect to  
16 see as an expected value of the binomial, because each  
17 binomial trial has a different probability to it.

18           And the other is, then you check the independence  
19 assumption, which is a critical assumption for a lot of these  
20 error trees. So you sort of get a feeling as to whether or  
21 not these independent assumptions make sense and whether or  
22 not these individual assessments are consistent with the  
23 observable kinds of variables.

24           DR. WILSON: If I may comment on the first thing,  
25 I would mention I put a thing on David's pile at lunchtime.



1 A research fellow and I are just writing a book on some of  
2 these things and have a chapter on just that. But it is in  
3 draft, and there is a copy on your pile there. And this is  
4 the thing I was going to send to you in the mail. So in a  
5 sense, that is an attempt at some of these questions. And  
6 the conclusion is that most of the attempts in the past have  
7 been full of problems, largely because I think they haven't  
8 asked the questions, and they have not been complete as to  
9 what they were aiming at in the end.

10 But I think that sort of thing, maybe we should --  
11 that was a rather general thing we were coping with. But for  
12 the NRC, what we want to go through here is those aspects  
13 which are particularly applicable to the NRC.

14 DR. OKRENT: By the way, let me know -- I have been  
15 an advocate of the proof quality control under risk assessment.  
16 So I have to support your general thesis.

17 I guess I don't want us to get into a position of  
18 doing what NSF has asked the National Academy to do for  
19 them. They have asked the National Academy to help them  
20 out with a long-range research program. If that is all we  
21 can do for the NRC, I would say we have been a failure.  
22 Maybe that is the best we can do, but I would consider it a  
23 failure.

24 So in that context, I don't know how we deal with  
25 the problem that risk assessments, not only nuclear but on

1 whatever, have been subject to uncertainties, systematic and  
2 otherwise, generally in the past. And a few have received  
3 careful review in detail.

4 DR. LOWRANCE: I would just insert my feeling that  
5 the NRC and some related agencies have really done more  
6 assessment than we seem to be giving them credit for. A lot  
7 of what has been done in my mind is not all that good, but  
8 there have been an enormous number of assessments, both in  
9 specific site proposals for reactors, industry, Government  
10 studies of all sorts on design problems and operator errors,  
11 and siting, and philosophy of siting and design, and it goes  
12 on and on.

13 Some of it has been done other places than NRC. I  
14 think we ought to give some credit and realize there is a lot  
15 of work to be drawn on; and then groups that have tried to  
16 pull it all together, have made some progress, and have come  
17 up with some kind of middle of the road assessments, as I  
18 understand it.

19 The Academy's CONIA study is coming out now with  
20 its overall reports in 23 different pieces or something of  
21 that sort. And maybe you want to speak to the basic assessment  
22 problem on the nuclear side. But I think there is more work  
23 that has been done than you are giving credit for. The Lewis  
24 panel in examining the WASH-1400 study I think was a good  
25 exercise.

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1 DR. WILSON: That wasn't a risk assessment per se.  
 2 I'm all for it. It was a review of -- a very valuable review  
 3 of the Rasmussen Report. That makes the Rasmussen Report  
 4 that much more valuable.

5 DR. LOWRANCE: It was a critique, a constructive  
 6 critique.

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1 DR. WILSON: I was wondering: as a matter of  
2 mechanism, the several ideas that I have now, I think, are  
3 things where NRC should and could be using risk assessment,  
4 which they don't at least appear, from my perspective, to be  
5 using, where they probably are on the back of Saul Levine's  
6 envelopes.

7 I could write down in a few pages those items and  
8 send them to you, and you could circulate them to other  
9 people.

10 DR. OKRENT: Well, I think that would be of  
11 interest. I would say it is not directly attacking the  
12 objective. I would like to see what these things are to see  
13 whether in fact there are some places where perhaps they  
14 should be that nobody has recommended to them.

15 DR. WILSON: What do you think is the objective?

16 DR. OKRENT: To try to develop some approach to  
17 quantitative safety goals and improve management.

18 DR. LOWRANCE: What are some examples, David? For  
19 example, what are a couple of things that we could urge  
20 someone to do?

21 DR. OKRENT: Well, you heard what George Kinshen  
22 proposed. He thinks he has proposed a set of quantitative  
23 safety goals for nuclear reactors. He has published this in  
24 the Institution of Civil Engineers, or something like this.  
25 There have been other proposals for quantitative safety

pv HEE 1 goals. You may think, "Well, they can't be posed that way.  
2 They have to be posed in some other way." What is the way  
3 in which they should be posed?

4 DR. MARK: David, I think I have been a little  
5 unclear. I am not sure if the rest of the group is. You  
6 have very frequently used the word "acceptable." That, of  
7 course, throws everything off the track, because  
8 "acceptable" -- is there such a thing? When you say  
9 "quantitative safety goal," that is a rather different  
10 kettle of fish. It is acceptable to Kinshen only,  
11 probably.

12 DR. OKRENT: You see, you can put out quantitative  
13 safety goals and say, "We plan to be using these." You  
14 don't have to call them "risk acceptance criteria." If  
15 somebody thinks this difference in working is beneficial, it  
16 doesn't particularly bother me. I think you are talking  
17 about the same thing.

18 DR. LAVE: David, I don't want to be churlish.  
19 But I was just trying to object to this notion that there is  
20 a schedule of that sort. I don't think there is a schedule  
21 of that sort like Kinshen laid out or a 10-9 or some other  
22 criteria. But it is necessarily more complicated than  
23 that.

24 DR. OKRENT: I wasn't saying it shouldn't be more  
25 complicated. Somebody asked me what do I mean by

pv HEE 1 "quantitative safety." Well, I said, "Here is an example  
2 that one man proposed, and he gave reasons -- brief, but  
3 reasons -- why he thought those were appropriate."

4 DR. WILSON: You see, Lave's constant comment is  
5 you can't make any logical sense out of risk calculations  
6 until you consider the benefits. He is constantly beating  
7 me on the head with that, and, of course, he's right. And  
8 that is why I bring up my comment, "Well, sometimes the  
9 benefit of not having to spend a 15-cent stamp is all the  
10 benefit I can itemize, but it is still a benefit." And he  
11 completes the logical structure.

12 I think that is one of the important things,  
13 because you can then stop somebody's arguing with you, and I  
14 think -- so I hadn't completely realized that that was  
15 Kinshen's aim, but, of course, very little of what we talked  
16 about today was directly approaching that. I mean, nowhere  
17 did Elizabeth Anderson really discuss how they picked up the  
18 10-6 per lifetime, which I think the average on that really  
19 would start -- or the origin of that really started with the  
20 FDA and it --

21 DR. OKRENT: The primary focus of the talks today  
22 was to ascertain as we could what was going on in some other  
23 federal agencies that were working in some way in the area  
24 of risk assessment. I never seriously expected them to try  
25 to address the question of what should be a quantitative

pv HEE 1 safety question.

2 DR. WILSON: That's a very serious problem for  
3 them, by the way, because EPA and FDA get into fantastically  
4 large problems at the moment.

5 DR. OKRENT: Well, I didn't really expect them to  
6 get into this problem with regard to the NRC except possibly  
7 the man who was from the insurers, and he was possibly the  
8 furthest of all of the speakers that we heard.

9 So, the purpose, as I say, was to see what was  
10 going on. I found it interesting to see what, for example,  
11 the Bureau of Reclamation was doing and where they stand  
12 now. I think that was a pretty giant step from where they  
13 were six years ago.

14 DR. LAVE: But it just seems to me that the next  
15 big public stink is going to be over those dams because of  
16 the vagueness of the numbers. I mean, there is an air of  
17 precision about them which is completely false.

18 DR. OKRENT: Well, he stated, in fact, to us that  
19 the uncertainties with regard to structural failure were  
20 larger than those of seismicity, in general. Those of  
21 seismicity are large. And he stated that also. The site he  
22 happened to deal with was one of those that you might say is  
23 a more fortunate one. You have some faults you can use to  
24 get a handle on what is the probability of a pretty severe  
25 earthquake for lots of sites. You are not in a position to

pv HEE 1 use some strong nearby faults, and you are less able to say  
2 what is  $10^{-4}$  and  $10^{-5}$  per year earthquake.

3 DR. SHINOZUKA: Since this is the first  
4 subcommittee meeting I have participated in, I must confess  
5 I am completely confused. Are we accepting the kind of  
6 approach of structural reliability -- and that is what the  
7 dam safety program dealt with -- that kind of approach we  
8 are going to accept by way of reaching the consensus as to  
9 acceptable risk criteria and the part of the analysis we  
10 have to perform?

11 When I talked about -- when I talk about this, my  
12 overriding concern is the real uncertainties and  
13 difficulties we face when we have to come up with numbers.  
14 Sometimes I feel it is hopeless, but we have to come up with  
15 some numbers. And that person from the Bureau of  
16 Reclamation must have had the same problem: that "The  
17 liquefaction -- my god, that is a terribly serious problem."  
18 And I think that the variation would be 100 percent  
19 more.

20 So, my overriding concern is how we are going to  
21 resolve this difficulty now as a subcommittee. We are not  
22 addressing ourselves to this problem and just assume that  
23 somehow we can arrive at reliability figures, then establish  
24 risk criteria, taking the cost-benefit analysis into  
25 consideration. Is that what we are doing here?



pv HEE 1

2 DR. OKRENT: I think one could try to answer your  
3 question in different ways. One is to say you should be  
4 able to develop what constitutes proper safety goals or risk  
5 acceptance criteria or whatever term you wish to use for  
6 nuclear reactors without having quantified what you think it  
7 is for the current designs, but from other considerations,  
8 and then, if the current designs meet that, good; and if  
9 not, you have to change the designs to meet it. That is one  
10 possible approach.

11 Now, another approach and one I am sure that is  
12 taken throughout the regulatory business is: they find at  
13 some point to which they can go or some point where they  
14 are, they think and they decide what the thing looks like,  
15 and then they try to rationalize: does this seem to be  
16 okay, and if it is okay then they can develop criteria that  
17 match.

18 DR. SHINOZUKA: My feeling is I think we could  
19 talk about which design is safer, but I don't think we can  
20 place absolute values of structural reliabilities. That is  
21 where my difficulty comes in.

22 DR. OKRENT: It may depend upon how reliable you  
23 think things have to be. That's the only way I can put it.

24 Well, I said earlier -- and I agree with you --  
25 the uncertainties are not going to be small.

DR. SHINOZUKA: So, supposing we agree upon

pv HEE 1 acceptable risk interpreted in terms of, let's say --  
2 probably many people don't agree -- but suppose we interpret  
3 that in terms of probability of failure. Can we then build  
4 or construct a structure which really can perform with that  
5 kind of probability?

6 I don't think that is guaranteed. I think we will  
7 have really difficult technical problems to build that kind  
8 of reliability into the structure by way of design.

9 DR. OKRENT: Again, I am going to have trouble  
10 answering in the abstract. 10-10, yes, we will have  
11 trouble. It will be possible. 10-3, maybe. 10-4 -- what  
12 degree of confidence do you want?

13 DR. SHINOZUKA: Well, I am simply trying to  
14 understand what we have to do.

15 DR. WILSON: Well, maybe one of the things that  
16 -- I think it is an important question because -- are we  
17 basically trying to set a level which is then for, you say,  
18 acceptable risk for a safety goal which, when explained to  
19 people, makes them reasonably happy? I mean, when I say  
20 "explain to people," I mean to politicians and economists  
21 and everybody.

22 So, then comes the question: what at the moment  
23 seems to be making a lot of people unhappy, and when one  
24 looks at it it is not the expected value of the risk people  
25 calculate, it is the possibility of very large societal

pv HEE

1 consequences which they -- so large they can't envisage  
2 them, and I keep getting at that on all sides.

3 So, I think the safety goal can actually be -- it  
4 must be adjusted. I think it is probable that a less safe  
5 reactor would be more acceptable if it could be more easily  
6 demonstrated that it has a certain safety level or if it  
7 could be shown that the consequences of a failure are much  
8 less severe.

9 I think this is not usually thought of: "I can't  
10 prove it's safe, but it's the best thing I know how to do."  
11 Sometimes something is not the best, but you can prove it a  
12 little more readily, and I think this is an important  
13 question which goes contrary to most engineering judgment.

14 DR. OKRENT: Well, you included two things,  
15 though, into your comparison. And I think that certainly  
16 the question of severe accidents is a factor in the  
17 discussion of nuclear power in what I would call the "risk."  
18 It is not just using the expected value, but you could build  
19 that into the risk acceptance criteria if you thought that  
20 is what should be the goal of the NRC.

21 DR. GRIESMEYER: That was suggested last time.

22 DR. OKRENT: It is possible there is nothing about  
23 criteria that automatically says "use a single number, use  
24 expected value," or what have you.

25 DR. GRIESMEYER: It also might be that --

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2 DR. OKRENT: Or you don't allow for benefits or  
you don't provide incentives.

3

4 DR. GRIESMEYER: The framework wouldn't even have  
5 to be necessarily insufficient condition; it may just be a  
6 necessary condition for acceptance. Because it may be very  
7 difficult to come up with a framework a priori that  
adequately deals with the whole decision process.

8

9 But there may be things that you can say are not  
10 acceptable risks, so use them as a hurdle and then continue  
with your decision process.

11

12 DR. OKRENT: Well, can I ask: would at least the  
13 three of you who have been fairly active in the general area  
14 one way or another for many years, would you be willing to  
15 sit down in some corner and think about it and try to come  
16 up with what you think represents a possible next step or a  
17 possible general step or a framework or whatever it is, in  
whatever way you see it?

18

19 And maybe Lester would come up with something that  
20 resembles the framework he was talking about, with an idea  
21 of how you would pursue it. And I think that would be real  
nice, in fact, to have.

22

23 And if Wilson came in with an approach that was  
24 partly the same or partly from a different perspective or  
whatever —

25

DR. MARK: And make it clear at what level he

pv HEE 1 would regard the 15-cent stamp is worthwhile.

2 DR. OKRENT: Well, more than that. Because that  
3 part of it, I think, we have a feel for.

4 But if you could try to do this in the next month  
5 -- and I know that is asking quite a bit -- it would really  
6 be useful.

7 DR. WILSON: It can certainly be done by January 1  
8 by me.

9 DR. OKRENT: Well, when I say a month, that is  
10 obviously a round number.

11 DR. LOWRANCE: An NRC month.

12 (Laughter.)-

13 DR. OKRENT: Don't put it that way.

14 By the way, I am going to try to get Paul Slovick  
15 in joining us in the flesh.

16 DR. LOWRANCE: I really would like to enter the  
17 mildest complaint that we have today a meeting of  
18 consultants and not a meeting of the subcommittee, because I  
19 find this a little troublesome, because if this is to be a  
20 two-way interchange, that hasn't been achieved. And  
21 although we have had one faithful member and yourself here  
22 all day, it is hardly a committee meeting. Surely, it is  
23 not a quorum.

24 DR. OKRENT: Actually, though, David Johnson and  
25 Mike Griesmeyer are supposed to be working in this area

pv HEE 1 full-time, and Bill Castenberg is working in it part-time.  
2 So, you do have the people who are trying to think actively  
3 in it. Kerr would ordinarily have wanted to be here, but he  
4 had a conflict.

5 What developed was the Commission thinks it needs  
6 comments from the ACRS on what it is supposed to do about  
7 the Kemeny Commission and some things like this, and so  
8 there are several members who are sitting in another room  
9 all afternoon. I think they are still there.

10 DR. MARK: And all of that blew up after all of  
11 this was planned.

12 DR. OKRENT: Yes. But if you would be willing to  
13 do that, I think that it would be, to me, a logical next  
14 step. If there is any way in which you can provide further  
15 information that could be useful, let me or  
16 Gary Quittschreiber know.

17 And I would like to talk -- sometime maybe I will  
18 get you on the phone, Dr. Shinozuka; I would like to discuss  
19 some of the things you have in mind and explore them in some  
20 more detail, if we can.

21 And we will also arrange to see that you get  
22 documentation. I don't know what Gary Quittschreiber has  
23 sent you so far, but we want to make sure you have the  
24 necessary background information.

25 Is that okay? All right.

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MR. QUIITTSCHREIBER: We have not received comments from any of the consultants on your frameworks.

DR. OKRENT: Well, if you would be willing to, Griesmeyer and I would appreciate it. You were given something that Mike Griesmeyer and I generated in November, and if you have any comments, we would appreciate it.

Well, thank you all very much. I will adjourn the meeting.

(Whereupon, at 6:25 p.m., the meeting was adjourned.)

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