### Radiological Terrorism: Clinical and Public Health Aspects

Satellite Conference Thursday, March 16, 2006 12:00-1:30 p.m. (Central Time)

Produced by the Alabama Department of Public Health Video Communications and Distance Learning Division

### **Disclosure**

 The opinions expressed by the speakers are not necessarily shared by the Centers for Disease Control and Prevention.

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### **Objectives**

- Delineate the types of radiation incidents
- Review basic principles of radiation physics
- Discuss clinical consequences of radiation injury

### **Objectives**

- · Review historical incidents
- Set up plans for public health response, hospital decontamination and performance of radiation detection safely
- Discuss available therapeutic measures for radiation injuries



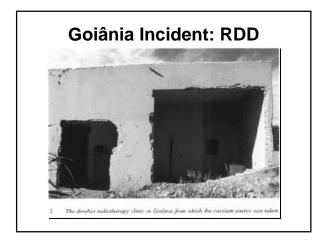
Recovered transport container



Sources used in mobile irradiators containing 3500 Curies of Cs-137 (Former Soviet Union)

### **Types of Threats**

- Radioactive dispersal device including the "Dirty Bomb" (RDD) scenario
- Simple radiological device
- · Nuclear weapon detonation
- Improvised nuclear device (IND)
- Nuclear power plant accident

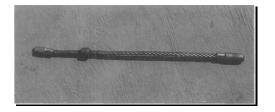


### **Goiânia Incident**





### Simple Radiological Device



### **Nuclear Weapon Detonation**

- August 1945
- Hiroshima: Little Boy made of Uranium (15 KT)
- Nagasaki: Fat Man made of Plutonium
- Damage and mortality secondary to Nuclear weapon detonation:
  - -Thermal blast (35%)
  - -Radiation (15%)
  - -Shock (50%) Contamination from radioactive fallout

# Nagasaki, 1945 Pre and Post

# Improvised Nuclear Device (IND)



Chairman Dan Burton Committee – Demonstration of example "suitcase nuke"



### **Nuclear Plant Incident**



# Background Radiation Fallout, occupational 2% Medical sources 30% Natural sources 68%

# Ionizing Versus Non-ionizing Radiation

- Non-ionizing radiation (microwaves, UV): does not interact with other atoms
- Ionizing radiation interacts with human body through direct and indirect effects:
  - Directly interacts with critical biological molecules in human cell such as DNA
  - Indirectly interacts with cell water to produce toxic free radicals

### Fundamental Principles of Radiation Protection in Whole Body Exposure

**Time** 

**Distance** 

**Shielding** 

# Radiation Damage by Two Effects

- 1) Deterministic effect
  - Dose determines effect
  - Must exceed threshold dose
  - Examples: Acute radiation sickness (ARS)

Local radiation injury (LRI)

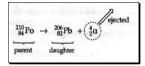
### **Radiation Damage**

- 2) Stochastic effects
  - Random variability and probability

# Two Types of Radiation Hazards

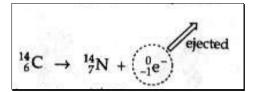
- 1. Body exposure:
  - Partial body exposure
  - Whole body exposure
- 2. Contamination:
  - External skin contamination
  - Internal contamination (from ingestion or inhalation or from open wounds)
  - Skin absorption is not clinically significant

# Types of Ionizing Radiation: Alpha Particles





### Types of Ionizing Radiation: Beta Particles



# Types of Ionizing Radiation: Gamma Rays

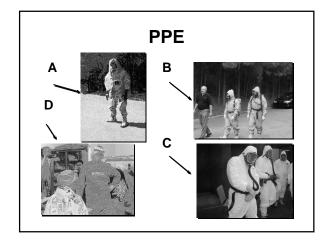
- · Gamma rays
  - Electromagnetic waves
  - Gamma rays are similar to x-rays
  - Are a significant external hazard (depending on duration of exposure, distance from the source, and type of shielding)

### **Types of Ionizing Radiation**

- Neutrons secondary ionization
  - Uncharged. Causes whole body irradiation like Gamma rays.
  - Emitted from fission reactions such as during a nuclear detonation, a nuclear reactor or criticality accident.

### **Radiation Units**

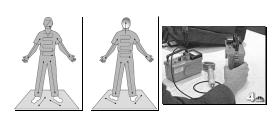
- RAD=
- REM=
- SI corresponding units:
  - RAD=Gray
  - REM = Sievert



### **Personal Protection**



### **Radiation Detection**



**REAC/TS and CDC** 

### **Radiation Survey**



### **Decontamination**

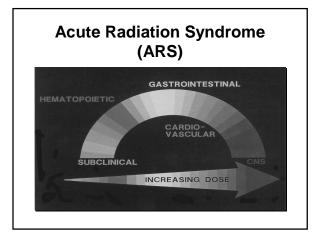
- Soap and water
- Decontamination should proceed in a centrifugal manner

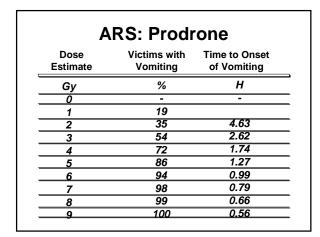
### **Decontamination**

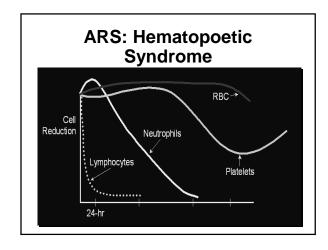
 Perform systematic patient (and personnel afterwards) decontamination.

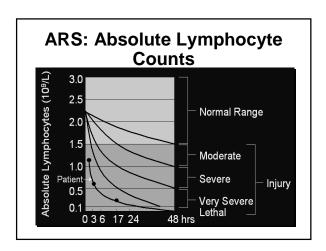
### **Clinical Syndromes**

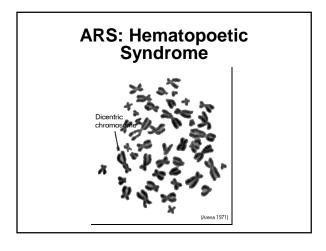
- · Acute Radiation Syndrome
- Internal Contamination
- Local Radiation Injury











# ARS: Hematopoetic Syndrome

- · Complications: infection and bleeding
- Treatment is supportive:
  - -Blood products
  - -Antibiotics
  - Colony stimulating factors such as filgrastim or G-CSF (Neupogen®) available in the SNS
  - Allogenic transplant

### **Internal Contamination**

Radionuclide	Medication		
lodine	KI (potassium iodide)		
Transuranics such as Plutonium & Americium	Zn-DTPA Ca-DTPA		
Uranium	Bicarbonate		
Cesium Rubidium Thallium	Prussian Blue* [Ferrihexacyano- Ferrate(II)]		
Tritium	Water		

# Radioactive Iodine Exposure Treatment

- Iodine Prophylaxis and Treatment
  - Potassium iodide (KI) is an effective, inexpensive thyroidblocking agent.

### **Transuranics**



### Cesium-137

Table 2: Cesium-137 Effective Half-life During and After Treatment with Insoluble Prussian blue (In Days, by Age, and Dose of Insoluble Prussian blue)						
Group	Age (Years)	Insoluble Prussian blue dose (grams/day)	No. of Pts.	During Insoluble Prussian blue Treatment - <sup>137</sup> Cs T <sub>1/2</sub>	Off Insoluble Prussian blue Treatment -  137 Cs T <sub>1/2</sub>	
Adults	> 18	10	5	26 ± 6 days	80 ± 15 days (all 21 adult patients)	
Adults	> 18	6	10	25 ± 15 days		
Adults	> 18	3	6	25 ± 9 days		
Adolescents	12 -14	< 10	5	30 ± 12 days	62 ± 14 days	
Children	4-9	< 3	7	24 ± 3 days	42 ± 4 days	

### Yanango, Peru. Feb 20,1999

- Iridium source loss
- Picked up by worker and put in his back pocket
- The patient developed severe radiation burn in his pelvic area as well as ARS
- · He survived with significant disability

### Yanango - Peru May and December,1999

Patient treated in France

May 1999



December 1999 -

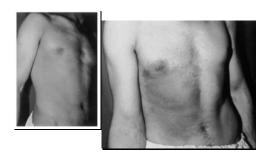


### **Local Radiation Injury**

- · May occur with or without ARS
- · Deterministic effect
- · Complications may be delayed
- Management includes pain control, antibiotics and surgery
- · Hyperbaric oxygen therapy

### **Local Radiation Injury**

- May be divided into 5 types:
  - -Epilation
  - -Erythema
  - -Dry desquamation
  - -Wet desquamation
  - -Necrosis

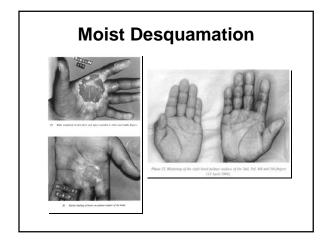


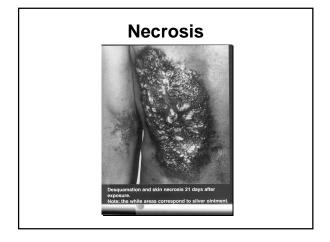
Worker in Iran who placed an Iridium source in his coat pocket for two hours

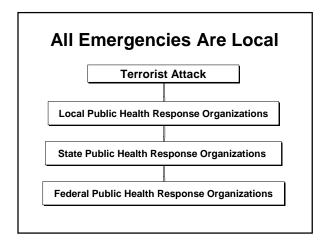
### **Moist Desquamation**

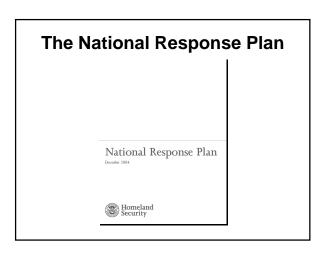


Patient from Goiania Incident (IAEA)









## Nuclear/Radiological Incident Annex

- Department of Homeland Security coordinates the Federal response to radiological Incidents of national significance
- Department of Justice has lead responsibility for criminal investigations
- Coordinating Agency is determined by the type of emergency
- Department of Health and Human Services is a cooperating agency

# State and Local Public Health Response

- · Monitor workers' health and safety
- Assure safe shelters and healthy food and water supplies
- Coordinate sampling and laboratory analysis of samples

# State and Local Public Health Response

- Field investigations and monitoring of people including creation of registries
- Criteria for entry and operations at the incident site
- Disease control and prevention measures

### **Medical Support**

- Evaluate health and medical impacts on the public and emergency personnel
- Develop medical intervention recommendations
- · Treat impacted citizens
- Request Strategic National Stockpile

### **More Information**

- CDC Radiation Emergencies www.bt.cdc.gov/radiation
- Department of Homeland Security www.dhs.gov
- Environmental Protection Agency www.epa.gov/radiation
- Nuclear Regulatory Commission www.nrc.gov/what-wedo/radiation.html
- Conference of Radiation Program Control Directors www.crcpd.org