Third Coordination Meeting of WHO Collaborating Centres
in Radiation Emergency Medical Preparedness and Assistance
(Leningrad, 21-24 May 1990)

PUBLIC HEALTH CONCERNS IN THE SOVIET UNION FOLLOWING THE
CHERNOBYL ACCIDENT*

Following the Chernobyl accident, public health actions have been undertaken to cover three main groups:

a) a group of immediate emergency response who developed acute radiation illness;

b) intervention teams under planned and controlled working conditions;

c) populations living in areas affected by the accident.

The public health actions for these three groups require different approaches, and specific guidelines and recommendations should be elaborated.

1. All-Union Distributed Registry (AUDR)

A large-scale project for monitoring long-term health effects in persons exposed to radiation following the Chernobyl accident has led to the establishment of the All-Union Distributed Registry in the city of Obninsk (fig.1). The Registry is a computerized multi-level system (fig.2-3) which stores the whole information on exposed individuals wherever they live in the USSR. More than 530,000 persons are now covered by the system. It also contains information on the dose reconstruction, and permits to study incidence and patterns of diseases as well as health consequences of exposure in various cohorts (fig. 4-7).

The medical and dosimetric data for 531,000 persons are grouped according to initial registration (so-called groups of primary registration - GPR):

1) group one - participants in recovery operations after the Chernobyl accident - 198.5 thousand;
2) group two - evacuated - 64.5 thousand;
3) group three - those living in contaminated territories - 265.5 thousand
4) group four - children whose parents are in enhanced risk groups (GPR 1 - 3) - 2.5 thousand.
    The age distribution is given in fig.8.

Using the software designed for the Register, one can group the registered population according to sex and age or other combinations. This is necessary for long-term planning of medical monitoring for different cohorts.

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