

A CALL FOR A RADIATION HEALTH COMMISSION

Gordon K. MacLeod, M.D.

As Chairman of the American Medical Association's advisory committee on radiation emergencies, it is my privilege to open this conference with a discussion of the need for the physician's involvement in radiation emergencies. The French premier during World War I, Georges Clemenceau, who was a physician, wisely observed: "War is much too serious a matter to be entrusted to the generals." If paraphrased today, he might have said that a nuclear accident is much too important a matter to be left to nuclear engineers. Contrary to such good advice, the management of nuclear accidents is left almost entirely in the hands of nuclear engineers and technicians with little if any physician input.

Although I believe there can be no adequate preparedness for the devastating medical consequences of nuclear warfare, public health and safety during nuclear accidents can best be safeguarded by physician participation in decision-making before, during, and after radiation emergencies. They are clearly best prepared to deal with the physical and emotional effects of such emergencies.

Until the Three Mile Island accident occurred, the nuclear power industry had been considered relatively safe. Early on, during both the TMI and Chernobyl accidents, the nuclear power industry failed to disclose relevant data in a timely fashion. The absence of information, both onsite and offsite, from managers, engineers, and technicians left the medical community without sufficient data to provide optimal radiation protection. Now, despite the continuing perception of safety by many experts, nuclear regulatory agencies are not able to relieve public anxiety about the health effects from nuclear power plants during radiation emergencies.

Informed physician participation in patient care at the time of radiation emergencies in nuclear power plants could alleviate some of this anxiety, not to mention the absolute necessity of medical management for any adverse health effects from radioactive waste disposal, storage of mine and mill tailings, transportation accidents, x-ray equipment and radioactive diagnostic materials in doctors' offices and hospitals, or radon contamination in homes.

Since the medical profession has to be involved in postaccident medical care from radiation accidents, physicians must increase and update their understanding of the public health and clinical consequences of all kinds of radiation emergencies. They must be kept

Professor of Health Services Administration and Clinical Professor of Medicine, University of Pittsburgh, Pittsburgh, Pennsylvania.