

Childhood Cancer and Nuclear Energy



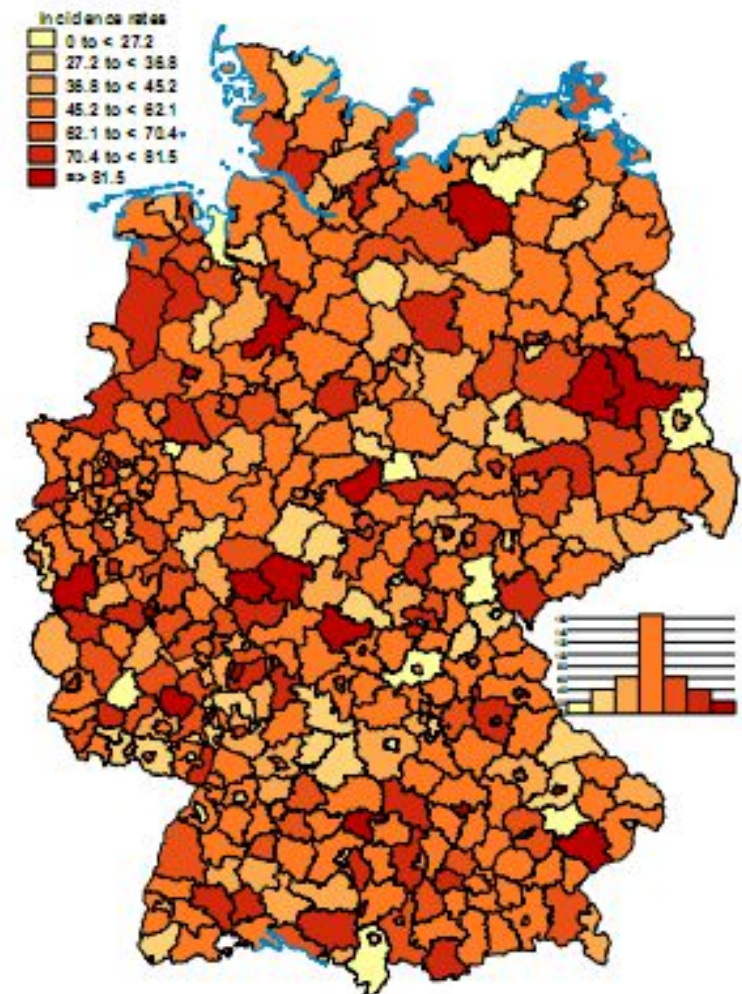
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Childhood Cancer and Nuclear Energy

Epidemiologic information

- Rate of cancer cases in Germany for kids <5 yrs:
absolute cases : 581 per year
annual incidence: 39-46 per 100,000
- Rate of leukaemia cases in Germany for kids <5 yrs:
absolute cases: 256 per year
annual incidence: 11-13 per 100,000

Standardized* incidence rates per million by districts
(Landkreise) (Germany 1999-2008)

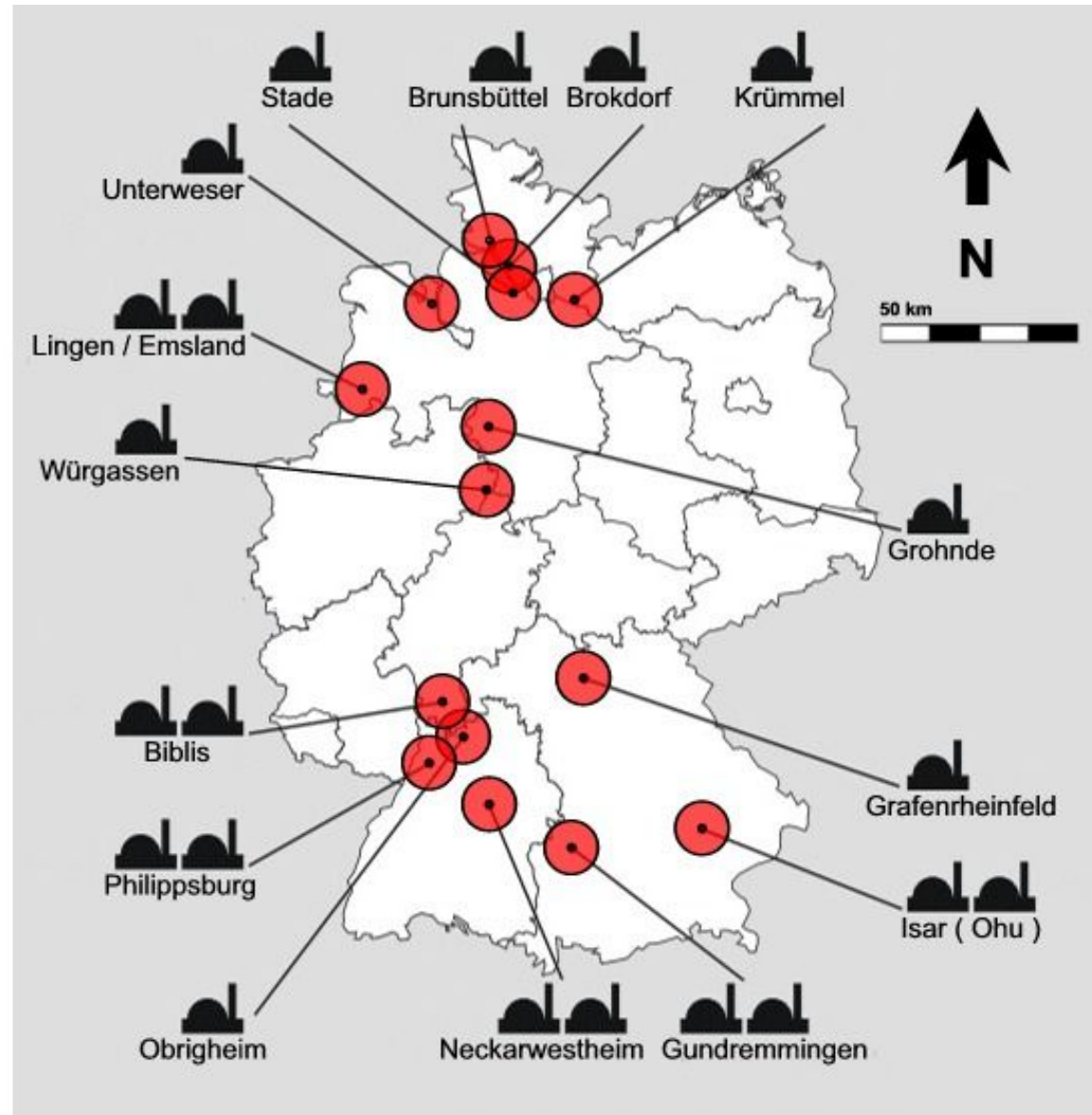


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Nuclear energy in Germany

- Germany has 16 nuclear plants:

Gundremmingen
Isar
Philippsburg
Neckarwestheim
Obrigheim
Biblis
Grafenrheinfeld
Würgassen
Grohnde
Emsland
Lingen
Unterweser
Stade
Krümmel
Brokdorf
Brunsbüttel



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The KiKK study

- „Epidemiologische Studie zu **K**inderkrebs **i**n der Umgebung von **K**ern**k**raftwerken“ („Epidemiological study about childhood cancer in the vicinity of nuclear plants“)
- **Sponsor:** Federal Bureau for Radiation Safety (BfS)
- **Carried through by:** Childhood Cancer Registry (KKR)
- **Scientific design:** 12 external scientists (6 „pro-nuclear“, 6 „anti-nuclear“)
- **Timeframe:** March 2003 – BfS orders KKR to start investigation
December 2007 – Publication of the study through KKR and BfS
- **Main publications:**
 - International Journal of Cancer (IJC): Leukaemia in young children living in the vicinity of German nuclear power plants
 - European Journal of Cancer (EJC): Case-control study on childhood cancer in the vicinity of nuclear power plants in Germany

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The KiKK study

- **Leading question:**
Do radioactive emissions from nuclear plants lead to higher rates of childhood cancer in children below 5 years of age?
- **Common understanding:**
The distance to a nuclear plant serves as substitute for the radiation exposure, since this cannot be measured directly.
- **Investigation time:**
1980 – 2003 = greatest set of data available to the childhood cancer registry

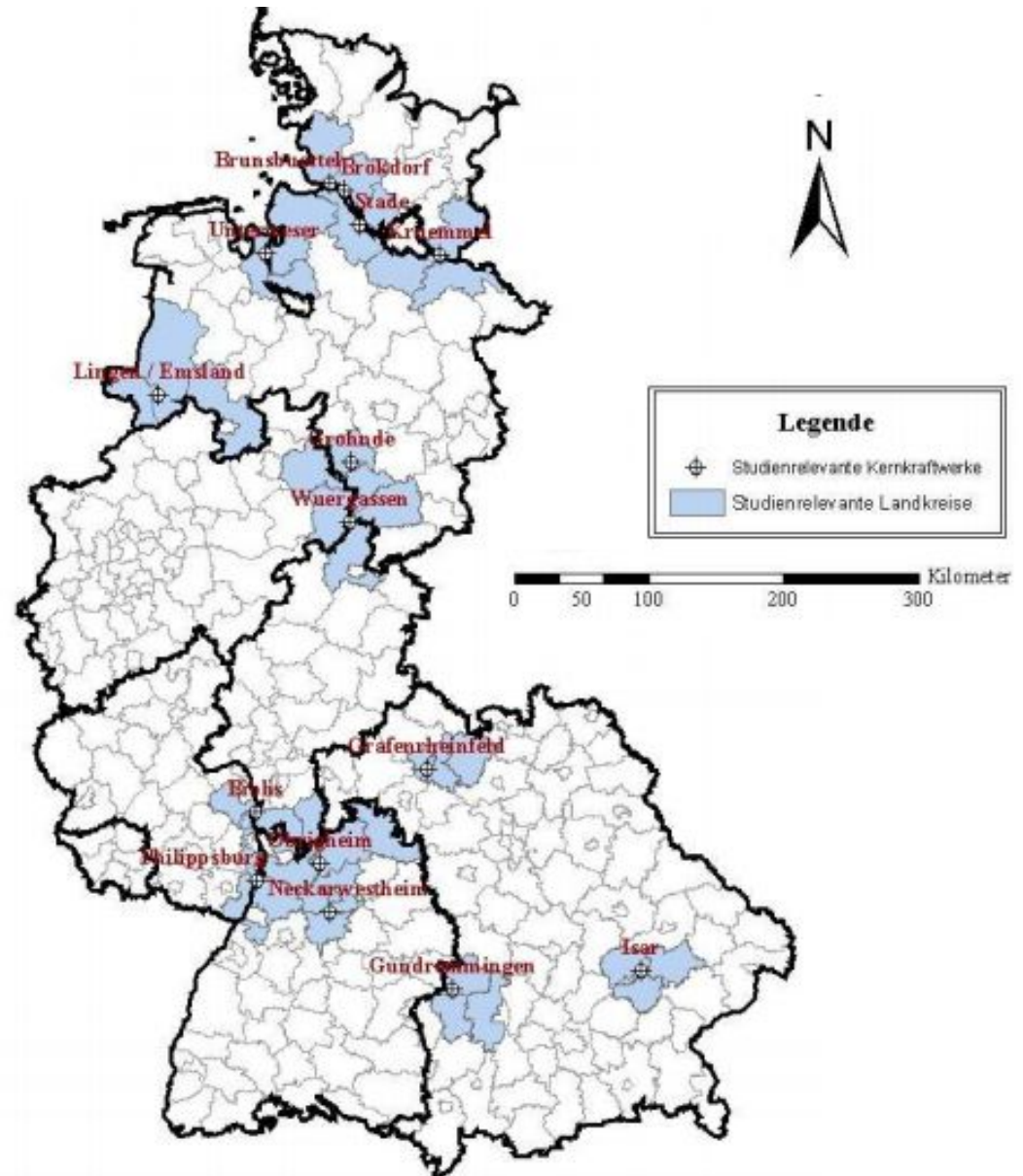
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- Areas of investigation:

Districts with nuclear plants

Two adjacent districts in main wind direction



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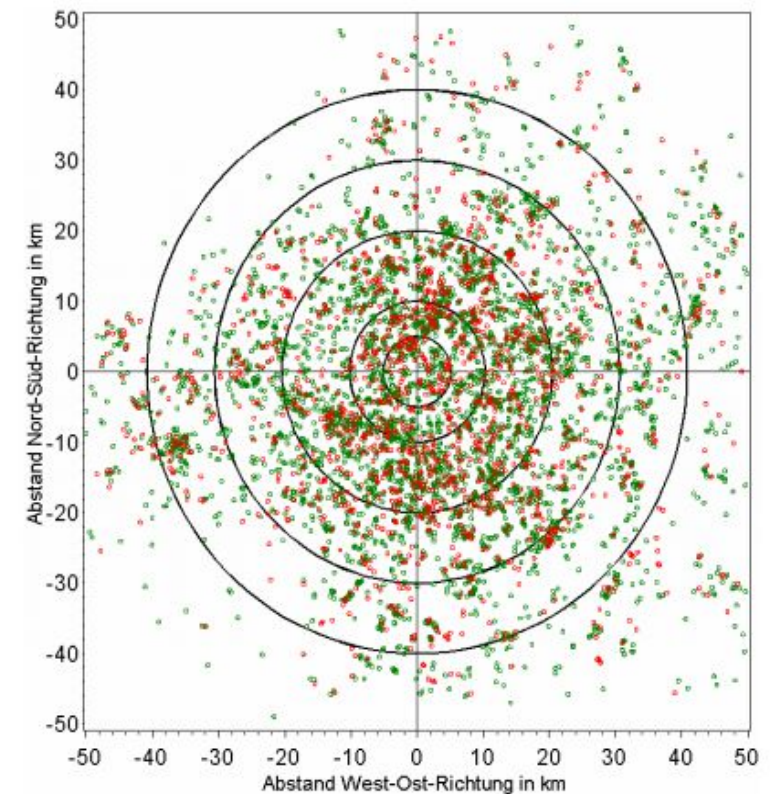
- **Study design:**

Case control study of healthy and diseased children in selected districts around and adjacent to nuclear plants

Questioning of families to rule out confounders

- **Children investigated:**

1,592 children < 5 years with cancer
4,735 children < 5 years as controls



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- **Confounder which were ruled out:**
 - Plausible other risk factors for cancer diseases
 - Age of mother at birth, pregnancy history
 - Radiation exposure of parents before conception
 - Other diseases, drugs, etc.
 - Insecticide exposure, lice treatment, etc.
 - Allergies, vaccinations, etc.
 - Social status
 - Moves in and out of the district recently



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- **Results:**

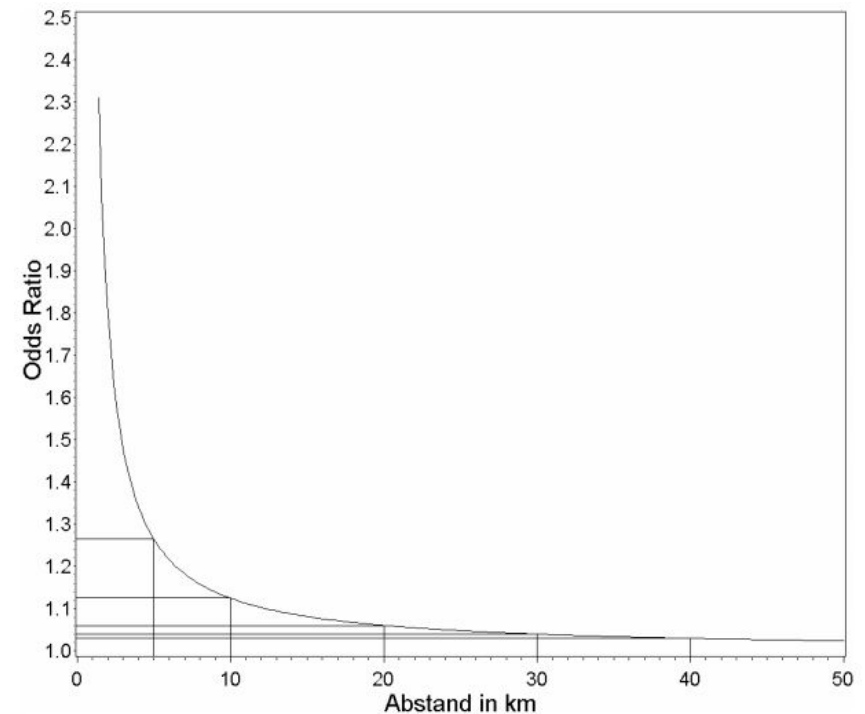
Significant rise in the incidence of childhood cancer in the vicinity of nuclear plants

The closer a child lives to a nuclear plant, the higher its risk to develop cancer

< 50 km: 08–18 % more cases than expected

< 10 km: 20–40 % more cases than expected

< 5 km: 60–75 % more cases than expected



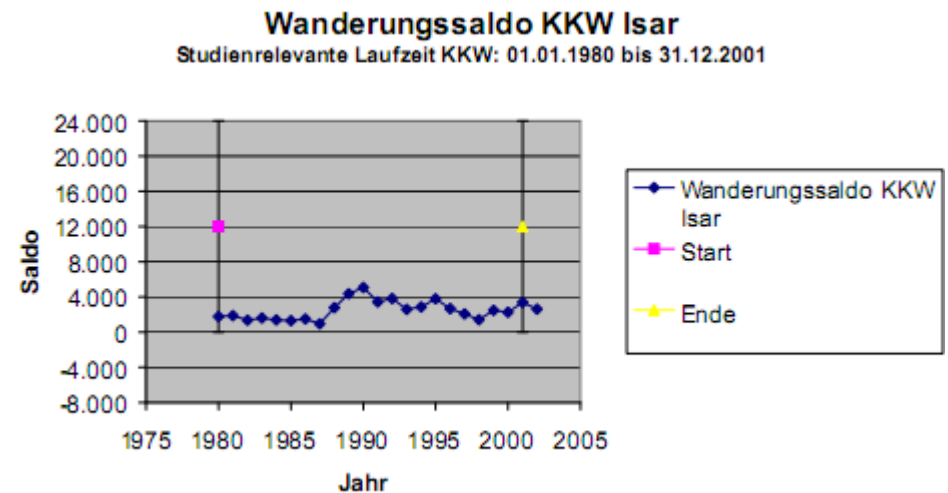
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- **Results:**

All other confounders were able to be ruled out as possible alternative causes of the rise in incidence. None showed a significant correlation.

Only the distance to a nuclear plant remained as the only significantly correlated parameter in all 16 study areas.



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- **Concrete numbers:**

48 cancer cases expected in children < 5 yrs, 5 km around a nuclear plant

77 cancer cases actually recorded (+ 60%)

= 29 additional cases in children < 5 yrs 5 km around a nuclear plant 1980-2003

$29/13,373 = 0,22\%$ attributable risk

= 1.2/581 additional cases per year

17 leukaemia cases expected in children < 5 yrs, 5 km around a nuclear plant

37 leukaemia cases actually recorded (+ 120%)

= 20 additional cases in children < 5 yrs 5 km around a nuclear plant 1980-2003

$20/5,893 = 0,34\%$ attributable risk

= 0.8/256 additional cases per year

20 of 29 additional cancer cases were leukaemia (69%; expected were 30%)

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- **Concrete numbers:**

Additional cases in all investigated areas 50 km around nuclear plants:

121-275 additional cases of cancer in children < 5 yrs 1980-2003

5-12 additional cases of cancer in children < 5 yrs per year

83-190 additional cases of leukaemia in children < 5 yrs 1980-2003

3-8 additional cases of leukaemia in children < 5 yrs per year

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Interpretation of the results:

- **Nuclear industry:** We adhere to the permissible radiation levels so we are not to blame and after all, we're talking about very few cases
- **Cancer registry:** The radiation emitted is too low to explain the results.
- **Scientific experts:** Radiation cannot be ruled out as a cause of the results
- **IPPNW:** We fear that the previous assumptions regarding radiation risk – especially regarding the effects of low-level radiation on children and embryos have been false and need to be revised.

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Medical effects of radiation:

Information of the nuclear industry:

- Annual max. level of radiation for people living near nuclear plants 0.3 mSv
- Calculated total exposure 5 km distant from a nuclear plant: 0.0003200 mSv
- Annual natural radiation exposure in Germany 1.4 mSv
- Annual radiation exposure through medical examinations 1.8 mSv

Information of the Federal Bureau for Radiation Safety:

- Deterministic teratogenic damage from 100 mSv
- Stochastic teratogenic damage from 20 mSv

Sources: Federal Bureau of radiation safety (www.bfs.de)

KiKK Study, German Childhood Cancer Registry

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Medical effects of radiation:

- Current guidelines regarding medical effects of radiation are mainly based on the data of the nuclear bomb drops on Hiroshima and Nagasaki (high-level γ -radiation)
- Newer studies show that these models are insufficient, since they do not take into account corpuscular radiation (low-level radiation from α - and β -emitters)



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Explanation for the high incidence of childhood cancer:

- Nuclear plants emit radioactive particles such as strontium-90 or tritium
- Wind and rain spread these to the surrounding countryside
- Animals and humans take them up through air, water and food
- The unborn child is exposed to them through its mother's blood



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Possible explanations for the discrepancies

- Peak radiation measurements are covered up through quarterly/annual averaging
- Data of radiation from nuclear plants is kept secret by the industry in Germany
- Accidents happen frequently and are not always reported or admitted
- The radiation sensitivity of embryos is much higher than that of the standard industry “reference man” - a Caucasian 1.80m, 80 kg healthy male.
- The effects of low-level radiation are being systematically ignored

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What needs to be done now?

- Organize follow-up studies
- Adequate information of the population
- Promote existing studies dealing with the effects of low-level radiation, many of them published very recently
- Exchange the “reference man” with a “reference embryo”



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Sources:

- Kaatsch et al. Epidemiologische Studie zu Kinderkrebs in der Umgebung von Kernkraftwerken (KiKK-Studie) – Vorhaben 3602S04334. Dt. Kinderkrebsregister, Mainz. urn:nbn:de:0221-20100317939. Salzgitter, 2007.
- E.Cardis. Cancer Mortality in 400 000 Worker Study. IARC Brit Med J 2005.
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- Gesundheitsbericht des Bundes 2009 (www.gbe-bunde.de)