

J.C.M.P.

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Another look at radiation hazards

I WISH to point out a number of misrepresentations in the article "Radiation safety rule ignored, says doctor" (SCM Post, March 20).

First, I did not say that Hongkong people, including doctors, are ignorant of the dangers of radiation. I claimed that many people, including a small number of medical personnel are not fully aware of the hazards from radiation.

With regard to the pregnant woman who was administered radioactive iodine, I learned about the case only *after* the abortion and therefore was in no way involved in advising her to have an abortion.

My comment to the reporter during the interview was simply that it is regrettable she was not informed in advance of the possible risks to the foetus.

I do, however, believe this may be only one of the unusual cases in medical practice and in general, the great majority of doctors are well-trained and well-aware of the dangers of radiation.

This exceptional case should not affect our confidence in the medical profession.

With regard to my own experience when I was asked to submit to a duplicate chest X-ray, I did not say that the "X-ray technician did not have his equipment properly set up."

This was suggested as one of a number of possible reasons which may contribute to the fairly common experience in Hongkong where repeated X-ray exposures are called for.

Incidentally, the correct statement of the "10-day rule" referred in the article should have been "all radiological examinations of the lower abdomen and pelvis of women of reproductive capacity, that are not of importance in connection with the immediate illness of the patient, should be performed only during the 10-day interval following the onset of menstruation when pregnancy is improbable."

Concerning medical education I did not say courses at the HKU medical department were "inadequate."

My point is that a major thrust of our educational effort should be to get more information about radiation effects to those medical personnel who are in direct contact with the public.

Of course, the general public also must play its part in reducing the hazards from radiation in everyday life and for this reason they must also be properly informed about the basic ideas of radiation in modern society.

Further, I did not say that practising radiographers in a Government hospital do not seem to know very much about the subject.

However, I did point out it is useful for radiographers to come to the extramural basic radiation protection course to take advantage of the difference in approach and emphasis between training in radiography and radiological protection.

The extramural course not only gives them a chance to refresh their knowledge, but also to recognise the magnitude of medical radiation doses in relation to the total environmental radiation dose.

The value of 70 units cited towards the end of the article is from fall-out mainly due to bomb tests; not from nuclear plant emission.

According to the latest report of the United Nations Scientific Committee on the Effects of Atomic Radiation, the average dose received by people living in industrial countries is about 2.4 mSv a year, of which 82 per cent is from natural radiation, 17 per cent from medical procedures and one per cent from other artificial sources.

Radioactive materials discharged by the nuclear power industry belongs to the last category and it contributes less than one per cent of the total dose received.

With the above clarification, I would like to take this opportunity to stress the following points:

- Both medical personnel and the public are responsible for control of the medical radiation dose which contributes over 90 per cent of all exposure from artificial sources.

- Effects of any extra radiation incurred by the normal operation of a nuclear power station is very little.

The view expressed to the reporter and in this letter are entirely personal and they do not relate to my appointment at the Radioisotope Unit of the University of Hongkong.

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[The inaccuracies are regretted.—Ed.]