EURADOS Annual Meeting AM2015 Winter School "The Fukushima Daiichi nuclear accident - the role of dosimetry in assessing the consequences". Dubrovnik, 12 February 2015

EURADOS SURVEY ON IN-VIVO MONITORING DATA OF EXPOSED FOREIGNERS IN JAPAN DUE TO THE FUKUSHIMA DAIICHI NPP ACCIDENT

M.A. Lopez (CIEMAT, Spain), P. Fojtik, D. Franck and J. Osko

EURADOS WG7 "Internal Dosimetry"

EURADOS AM2015, Winter School



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PARTICIPANTS:

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- B. Breustedt, KIT, Germany
- U. Gerstmann, BfS, Germany
- C. Scholl, LIA.NRW, Germany
- V. Kamenopoulou, GAEC; Greece
- K. Potiriadis, GAEC, Greece
- I. Balashazy, MTA EK, Hungary
- P. Zagyvai, MTA EK, Hungary
- B. Lind, NRPA; Norway
- J. Osko, NCBJ, Poland
- R. Kierepko, IFJ PAN, Poland

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- B. Perez, CIEMAT, Spain
- L. Del Risco, SSM, Sweden
- G. Etherington, PHE, **UK**
- J.E. Scott, PHE, UK
- V. Vasylenko, NRCMR, Ukraine





EURADOS WG7 - Internal Dosimetry

Collaboration of EURADOS WG7 NIRS with NIRS - National Institute of Radiological Sciences, Japan –

- EURADOS WG7 was contacted in June 2012 for the revision of the proceedings of 1st NIRS Symposium on "Reconstruction of Early Internal Dose in the TEPCO Fukushima Daiichi Nuclear Power Station Accident", Chiba, Japan, 2012
- Osamu Kurihara, NIRS (Japan) attended the EURADOS WG7 meeting in Budapest in October 2012

Invitation to WG7

2nd NIRS Symposium and Technical visit to Fukushima "Reconstruction of Early Internal Dose in the TEPCO FDNPS Accident", Tokyo, January 27-28, 2013





FURADOS



EURADOS WG7 - Internal Dosimetry

January 2013: some WG7 members attended 2nd NIRS Symposium in Tokyo

- Visit at Fukushima NPP area including J-Village and Fukushima Daiini NPP
- Proposal of EURADOS Survey: WG7 will collect information about monitoring data of exposed foreigners in Japan, obtained in their respective countries at early stage after Fukushima Daiichi NPPP accident









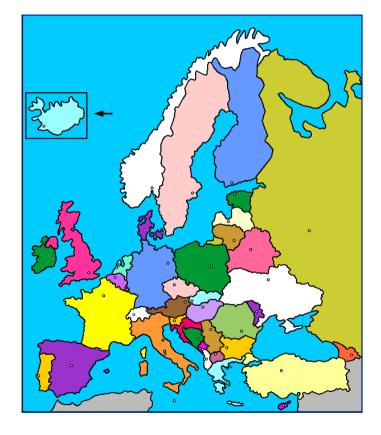


EURADOS Survey 2013:

✓ 300 foreigners in-vivo monitored from 15 countries (adults and children)

176 exposed persons (adults) from

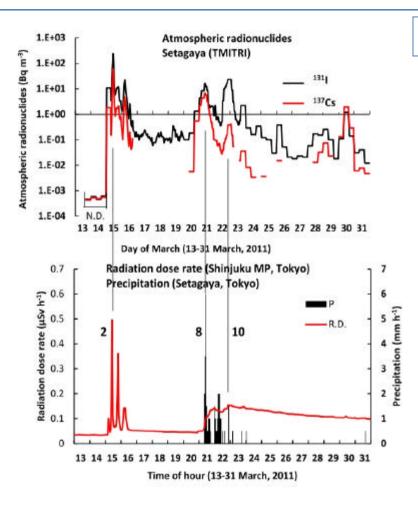
- ✓ Belgium (9),
- ✓ Canada (1),
- ✓ Czech Republic (8),
- ✓ Finland (1),
- ✓ France (76),
- ✓ Germany (58),
- ✓ Greece (5),
- ✓ Hungary (2),
- ✓ Norway (3),
- ✓ Poland (7),
- ✓ Sweden (1),
- ✓ UK (1)
- ✓ Ukraine (4)







EARLY		1			
<u>MEASUREMENTS</u>		<u>LATE</u>		•	Internally exposed
<u>(MAR- APR 2011)</u>	No. of cases	MEASUREMENTS			persons (EURADOS
Akita	1	<u>(= MAY_2011)</u>	No. of cases		Survey)
Sendai	32	Miyagi Pref.	1		^
Yonezawa	2	Sendai	1		°
Fukushima City	18	Fukushima City	5		
Minamisoma	1	Koriyama	1		SE V
Koriyama	4	Tamura	1		5~
Centre (around NPP)	9	NPP	4		
Tamura	1	Utsunomia	1		R S
Iwaki	6	Hitachi	3		in a go
Utsunomiya	1	Tsukuba	1	F	Lange Sarah
Mito	7	Ushiku	1	Es ?	3E~~~
North of Tokyo	2	Tokyo	5	E.	
Chiba	3	Chiba	2	00	A COMPANY
Tokyo	49	Yokohama	2		
Osaka	3	TOTAL: 27			
Hiroshima	1				and the second second
TO	FAL: 139				
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The Internal Exposure:

- Release events from Fukushima Daiichi reactors on 12-25 March 2011
- Largest releases before 17 March
- **Tokyo:** higher concentration of gamma emitters in the air on 15 March and 21-22 March 2011
- Internal exposures: mainly radioione and radiocaesium; also Tellurium
- Fallout started to be significant on 16 March 2011

(4) Setagaya (TMITRI)

H. Tsuruta 2012, 1st NIRS Symposium

-EURADOS





Scenario of EURADOS Survey (I): EXPOSED PERSONS

- Foreigners returned at home after suffering the earthquake and its consequences, concerned about radiological exposure received in Japan.
- Contact with regulatory bodies and/or National Administration and Dosimetry labs.
 - **Questionnaires to collect information** about location in Japan during the Fukushima Daiichi NPP accident, diet habits, time spent indoor/outdoor,...
- Internal dosimetry services/laboratories: not easy to make public understand and trust in the results of in-vivo and in-vitro monitoring and dose. It was required social skills and empathy with the exposed persons being monitored.
- Members of the public with no knowledge about radioactivity, had to trust in authorities and dosimetrists to understand the results of the measurements. Main concern: health effects of the intakes detected

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Scenario of EURADOS Survey (II): INTERNAL DOSIMETRY SERVICES/LABORATORIES

- Capabilities required for in-vivo monitoring of gamma emitters:
 - Whole Body Counter for the measurement of gamma-emitters in total body (radiocaesium isotopes, also ¹³²Te)
 - Thyroid counting for evaluation of radiodine in thyroid (¹³¹I, ¹³²I)
 - Calibration for adults and for children
- Assumptions for interpretation of monitoring data & dose calculations. 1st approach:
 - Inhalation of gamma emitters from the radioactive plume (release phase)
 - Time of intake; 12 March 2011
 - Members of the Public: particle size AMAD= 1 μ m
- **Communication with people being in-vivo monitored**: lenguage of science with "easy words" in order people understand and trust in the results of measurements and dose





EURADOS SURVEY: IN-VIVO MONITORING of gamma emitters in total body and radioiodine in thyroi

(1) HP Ge detectors for gamma emitters in Total Body:

Mobile Units:

WBC- Shielded Rooms: Chair and bed counting geometries:





(2) Nal(TI) detectors:

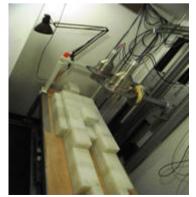
FASTSCAN WBC: 2 Nal(Tl) **Total Body & Thyroid** Monitoring, also in Fukushima site



Nal(TI) detector: ¹³¹I, ¹³²I in Thyroid



(3) Nal(TI) + HPGe detectors: shielded room, Total Body



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EURADOS SURVEY: IN-VIVO MONITORING of gamma emitters in total body and radioiodine in thyroi

Quantification in terms of Activity (Bq) retained in total body or in thyroid at a time t (days) after the intake by gamma spectrometry

				HPGe detectors: best identification of
Radionuclide	T _{1/2}	E (keV)	Yield (%)	peaks in the gamma spectrum
I-131	8.02 days	80.19 284.30 364.49 636.99	2.6 6.1 81.7 7.17	And max 100 Read max 100 Bit 100.00 100 Jail 100<
I-132	2.30 h	667.70 772.60 1399.0	98.7 75.6 7.0	
Te-132	3.20 days	49.72 228.33	15.1 88.1	
Cs-134	2.07 years	569.33 604.72 795.86	15.4 97.2 85.5	40K
Cs-137	30.17 years	661.66	85.1	1000 keV 2000 3000

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EHRADE



Results of EURADOS SURVEY: In-vivo monitoring data Activity > DL, only adults

Thyroid Monitoring

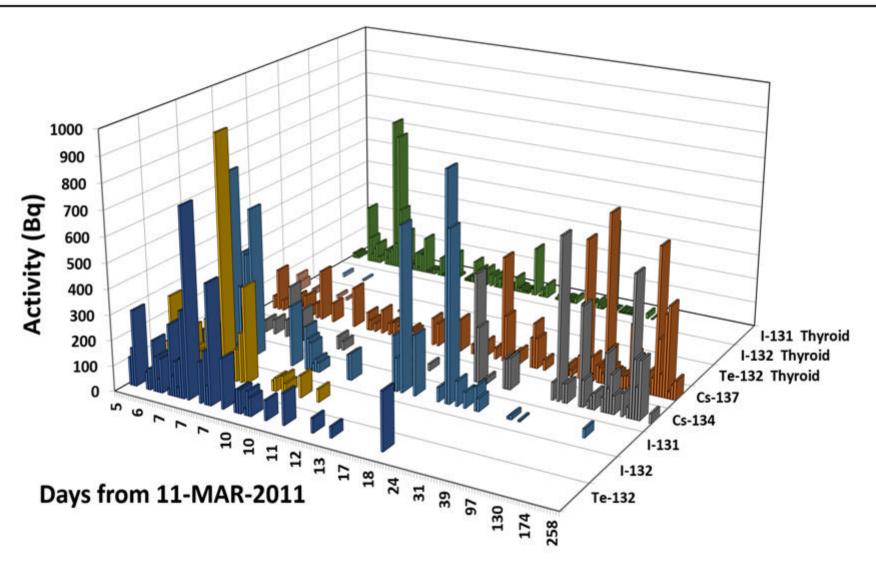
Radionuclide	No. of cases	Activity (Bq)
131		Max: 644
	100	Min: 9
132		Max: 86
102	2	Min: 3

WBC - Total body Monitoring

Radionuclide	No. of cases	Activity (Bq)
¹³⁷ Cs		Max: 670
	77	Min: 18
¹³⁴ Cs	40	Max: 637
		Min: 24
131	45	Max: 890
1		Min: 6
132		Max: 953
1	26	Min: 41
¹³² Te		Max: 744
	26	Min: 24











As**sessment of doses** due to internal exposures

- Determination of amount of radioactive material in the human body by direct measurements from Whole/partial Body Counting (WBC) and/or indirect methods like excretion analysis or air monitoring => Monitoring data M (Bq, Bq/d or Bq/m³)
- The interpretation of the monitoring data M(Bq), in terms of Intake I (Bq) and Committed Effective Dose E(50) mSv, requires to know:
 - the physical (e.g. particle size: AMAD) and chemical (absorption type) characteristics of the radioactive substances inside the body,
 - their biokinetics,
 - the time of intake
 - The type of intake (acute, chronic) and
 - the pathway (inhalation, ingestion,...).





INTERPRETATION OF MONITORING DATA FOR THE ASSESSMENT OF INTAKE I(Bq) AND DOSE E(50) mSv

Internal Dose Assessments from a single monitoring data

- Date/Time of Intake T₀ (dd/mm/yyyy)
- Date/Time of Monitoring: t (days) post Intake
- Result of *In-vivo monitoring: M(Bq)* Activity (from WBC) or *In-vitro monitoring: M(Bq/d)* Activity rate in excreta
- Assessment of Intake I (Bq) from a <u>single monitoring data</u> M(Bq):

M(Bq)= monitoring data (WBC or excreta)

- m(t) = retention function (whole body or organ) or excretion function (excreta) at t (days) post intake (ICRP) = fraction of retained/excreted activity when Intake is 1Bq
- Assessment of the Committed Effective Dose E(50) mSv:

```
E(50) mSv = I(Bq) * e(50)(mSv/Bq)
```

where e(50) mSv/Bq is the dose coefficient (ICRP) = committed effective dose when Intake is 1 Bq

 $I = \frac{M}{M}$

m(t)



EURADOS WG7 - Internal Dosimetry

EURADOS SURVEY ON IN-VIVO MONITORING DATA OF EXPOSED FOREIGNERS AT EARLY STAGE AFTER Fukushima Daiichi NPP Accident:

CASE STUDIES

- Intakes of radionuclides detected in 176 exposed persons from
 - ✓ Belgium (9),
 - ✓ Canada (1),
 - ✓ Czech Republic (8),
 - ✓ Finland (1),
 - ✓ France (76),
 - ✓ Germany (58),
 - ✓ Greece (5),
 - ✓ Hungary (2),
 - ✓ Norway (3),
 - ✓ Poland (7),
 - ✓ Sweden (1),
 - ✓ UK (1)
 - ✓ Ukraine (4)





FRANCE:

IRSN: in-vivo monitoring at Le Vésinet WBC (near Paris) **and mobile units Contact-person: Didier Franck**

- 62 company employees returning from Japan (business trips)
- 36 Air crew members
- 95 Journalists
- 75 private individuals (expatriates and students)
- End of 2011: 280 in-vivo measurements 268 French citizens (some people monitored several times)
- Whole body counting: measurement of gamma emitters in total body (tm= 20 min)
- Thyroid counting: determination of radioiodine (¹³¹I, ¹³²I) in the thyroid (tm= 15 min)
- 84 measurements: Activity (Bq) > DL (Detection Limit) 30% positive results





- **France-IRSN**: Collection of a questionnaire from French citizens at their arrival, with information in the locations in Japan during and after the Fukusima Daiichi NPP accident and the places they visited at that time before their leaving.
- IRSN Capabilities:
 - Fleet of 10 Mobile units for Accident Monitoring of internal contamination
 - HPGe detector systems









- France-IRSN:
 - Group 1: 77% of monitored persons during the first 3 weeks after Fukushima Daiichi NPP accident (mainly journalists)
 - Group 2: monitored persons on July-September 2011 (summer holidays)
- In-vivo monitoring results:
 - Activity in the **thyroid**: ¹³¹I most frequently detected; also ¹³²I / ¹³²Te
 - Activity in total-body: ¹³⁷Cs; and ¹³⁴Cs detected in few cases
- Interpretation of monitoring data for Dose assessments:
 - Assumptions: time of intake on 12 March 2011, Acute Inhalation, particle size: AMAD= 1 μm
 - Estimation of the Committed Effective Dose E(50) mSv
 - Annual Dose Limit (public exposures): E= Hp(10) + E(50) = 1 mSv/year
 - H_{THYROID} that triggers the process of administering stable iodine in France is 50 mS





- France-IRSN. Most exposed person:
 - Date of measurement: 18/3/2011
 - Location of exposure: lwaki
 - In-vivo monitoring results (IRSN Mobile Unit):
 - Thyroid counting (DL= 5 Bq)
 161 ± 16 Bq of ¹³¹I
 - Whole Body Counting (DL= 40 Bq) 744 ± 112 Bq of ¹³²Te 953 ± 143 Bq of ¹³²I 204 ± 31 Bq of ¹³⁷Cs
 - Dose evaluation:
 - Total E(50)= 0.09 mSv, < 0.1 mSv
 - $H_{THYROID} < 1.4 \text{ mSv}$





Germany in 2011: 19 in-vivo monitoring laboratories, 358 measurements reported, Most of results < DL, only 75 cases (21%) > DL

- **EURADOS Survey**:
- BfS Contact person: U. Gerstmann
 - 22 cases reported (dates of measurements: 18/3-28/4/2011 + 20/10/2011)
 - Only WBC, no thyroid counting
- KIT- Karlsruhe Institute of Technology Contact person: B. Breustedt
 - 1 case reported (date of measurement: 18/3/2011)
 - WBC results: detection of ¹³¹I, ¹³⁷Cs, ¹³⁴Cs, ¹³²I, ¹³²Te in total-body (>LD)
- LIA.NRW- Contact person: C. Scholl
 - **35 cases reported** (dates of measurements: **16/3/2011 24/11/2011**)
 - WBC and Thyroid counting results reported

The Fukushima accident and travel medicine. Analysis and recommendations.

C. Scholl, W. Lieberz, P. Jansing, T. Küpper.

Travel Medicine and Infectious Disease (2013) 11, 139-145.





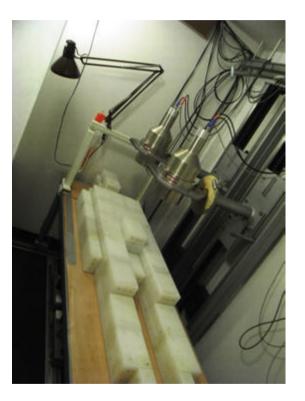
Germany - Summary:

- Radionuclides detected:
 - Thyroid counting (up to 29/3/2011)
 - ¹³¹I: 20 cases, maximum activity 644 ± 74 Bq in thyroid (18/3/2011)
 - ¹³²I: 2 cases, 8 and 15 Bq (17-18/3/2011)
 - **WBC**:
 - ¹³⁷Cs detected in 44 cases, range of 18 581 Bq in total body
 - ¹³⁴Cs detected in 22 persons, range of 24 637 Bq in total body
 - ¹³²Te detected in 22 persons, range of 42 344 Bq in total body, <u>up to 24/3/2011</u>
- Most of cases E(50) < 0.1 mSv
- E(50)_{MAX} = 0.5 mSv
 - External dose to be received in a flight from Europe to Japan and return
 = 0.13 mSv (calculated with EPCARD).
 - Average annual effective dose in Germany: 2.1 mSv
 - Intakes due to Fukushima Daiichi NPP accident: no radiological threat





Germany - Summary:



BfS WBC Berlin. HP Ge detector

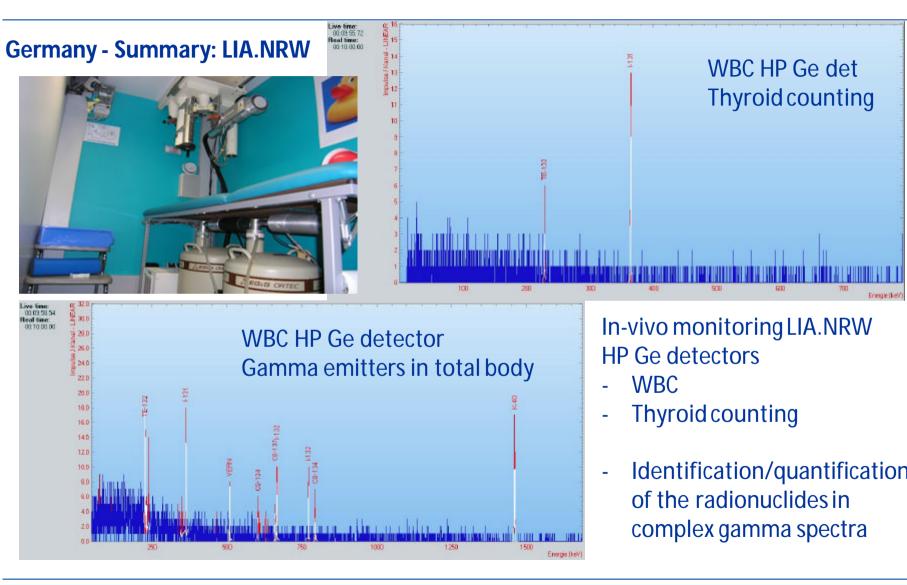


BfS WBC Neuherberg: 4 big Nal-detectors and a small HPGe-detector under the stretcher. The detectors have been replaced with four big HPGe-detectors with electric cooling in March 2013. Brick calibration phantom – Standard Man – gamma emitters in total body.

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-EURADOS

- **UK –** Contact persons: July Scott, George Etherington (PHE, UK) 1 case reported: Male journalist.
- Internal exposure in Japan:
 - 12-13 March 35 km from Fukushima Daiichi NPP
 - 13-16 March 80 km from NPP
 Open air most of the time
 Iodine Tablet administration on 25 March 2011

Time of intake: assumed 12 March 2011

- Measurements at PHE, Chilton, UK
 - 4 April 2011, 23 days post intake
 - In-vivo monitoring:
 - WBC: gamma emitters in total-body
 - Thyroid counting: Radioiodine
 - In-vitro monitoring: gamma emitters in urine (gamma spectrometry)



Top small HP Ge detector used for **thyroid counting**

25





FOREIGNERS AT EARLY STAGE AFTER Fukushima Daiichi NPP Accident

UK cont.

- Intake and dose evaluation:
 - Time of intake: assumed 12 March 2011
 - Monitoring data: 4 April 2011, 23 days post intake
 - WBC: 5 Nal(TI) detectors
 - Result of 131 I: 64 ± 35 Bq in total-body
 - ¹³⁷Cs, ¹³⁴Cs < MDA (Minimum Detectable Activity = 40 Bq)
 - Thyroid counting: 1 small HP Ge detector
 - Result of ¹³¹I: 27 \pm 14 Bq in thyroid
 - In-vitro monitoring:
 - Result of 131 I: 0.39 ± 0.18 Bq in 24h urine simple
 - Interpretation of Monitoring data: Calculation of Intake I(Bq), E(50) and H_{THYROID}
 - Acute Intake Inhalation on 12 March 2011
 - ¹³¹I: type F (aerosol, absorption type F "FAST", rapid absorption to the blood)
 - ICRP default values (particle size AMAD= 1 μm)
 - Calculation (IMBA software):
 - Intake = 2536 Bq of ¹³¹I
 - <u>E(50) = 1.87E-2 mSv , <1 mSv</u>
 - H_{THYROID} = 3.72E-1 mSv





- Sweeden Contact person: Lilian del Risco (SSM) 6 cases reported. Measurements performed: SSM Stckholm (in-vivo monitoring) Linköping Univ. Hospital (in-vitro monitoring)
- 1. Case A. Male, construction worker in Tsukuba
- Internal exposure in Japan:
 12 March 2011: travel from Tsukuba to Tokyo
 Arrival at Stokholm Airport on 14 March 2011



- Measurement performed at SSM WBC, on <u>14 March 2011 !!!!</u>
 - WBC. Nal(TI) detector: **195 ± 22 Bq**¹³⁷Cs
 - 170 ± 20 Bq ¹³⁴Cs
 - Thyroid counting: ¹³¹I < Detection Limit (DL= 10 Bq)
- Interpretation of Monitoring data: Calculation of I(Bq) and E(50):
 - Acute Intake Inhalation of Cs type F. Particle size: AMAD= $1 \mu m$
 - Total Intake = 540 Bq;
 - E(50) = 9E-3 mSv <1 mSv





SSM WBC, Stockholm



Sweeden -cont.

- 2. Case C.
- Internal exposure in Japan:
 - Female living in Tokyo
- Measurements performed on 16 April 2011 at <u>Linköping Univ. Hospital, Sweden</u> In-vitro monitoring. Spot urine samples Vol= 1L. Gamma spectrometry.
 - 21.4 ± 0.5 Bq/l ¹³¹l in urine
 - 0.93 ± 0.01 Bq/l ¹³⁷Cs in urine
- Interpretation of Monitoring data: Calculation of Intake I(Bq) and E(50)
 - Acute Intake Inhalation Particle size: AMAD= 1µm ???
 - Intake ¹³¹I: 25390 Bq
 - Intake ¹³⁷Cs: 74 Bq
 - Total Intake = 25464 Bq;
 - Total E(50) = 0.18 mSv <1 mSv
 - <u>Hthyroid= 0.14 mSv</u>





- **Greece** Contact persons: K. Potiriadis, V. Kamenopoulou (GAEC) **5 cases** reported: Greek citizens in Tokyo
- WBC measurements: 1 NaI(TI) detector + 1 HP Ge detector
 - ¹³⁷Cs , ¹³⁴Cs (3 cases): up to 350 Bq
 - Detection of ¹³²Te/¹³²I (very small amounts, not quantified)
- Thyroid counting: Nal(TI) detector
 - ¹³¹I (5 cases) up to 800 Bq
- In-vitro monitoring: HP Ge detector, γ emitters in urine samples









Greece – Cont.

- Interpretation of monitoring data dose calculation (IMBA Software):
 - **Time of intake:** the day that the plume arrives in Tokyo (14/3/2011)
 - Acute Inhalation
 - **Absorption type:** available data from the environmental measurements during the time after the accident were used:
 - In the case of ¹³¹I, a mixture of 30 % F (Fast) and 70% V (vapour) was assumed

Calculation of E(50) based on the measurements of lodine and Caesium isotopes. The **estimated doses were: E(50) = 75, 280, 43, 9, 42 μSv.**

E(50)max = 0.28 mSv





Finland – Contact persons: Maarit Muikku, Jussi Hurihari (STUK)

1 case reported

- Monitoring : <u>11/9/2011</u>
- WBC: ¹³⁷Cs: 80 ± 20 Bq. ¹³⁴Cs: 90 ± 20 Bq
- Interpretation of monitoring data: calculation of Intake I(Bq) and E(50)
 - Intake scenario: CHRONIC INHALATION during 4 months
 - ICRP default values, IMBA software
 - Intake < 2.5 Bq/d
 - E(50) < 4E-3 mSv





Canada – Contact person: Chunsheng Li (Health Canada)

1 case reported

- Monitoring : 04/01/2012
- WBC: ¹³⁷Cs: 37 ± ? Bq. ¹³⁴Cs: 78 ± ? Bq
- Interpretation of monitoring data (IMBA Software) The scenario of Intake :
 - Person working in Japan
 - Considering that Japanese Government implemented appropriate food/water control after the release of radioactive material in the environment: INHALATION is assumed as main pathway of intake
 - Acute Intake (Inhalation) in the week 14-21 March 2011
- Intake and Dose: ¹³⁴Cs: I= 700 Bq; E(50)= 6.8E-3 mSv ¹³⁷Cs: I= 1150 Bq; E(50)= 7.7E-3 mSv TOTAL E(50)= 0.014 mSv





- Belgium– Contact person: Anne Laure Lebacq (SCK-CEN, Mol)
- 8 cases reported, **in-vivo monitoring**:
 - 17/3/11 20/4/11, detection of ¹³¹I in thyroid (6 91 Bq), Ge detector
 - 10/8/11 and 23/12/11, WBC: 137Cs detected (~ 55 Bq), Nal(Tl) detector



 1st measurement (SCK-CEN): 17/March/2011 detection of ¹³¹I, ¹³⁷Cs > DL

Tokyo	->	Fukushima area	-> Tokyo
5/May		6-10 May	12/May
_			

2nd measurement (SCK-CEN): 13/May/2011
 ¹³¹I, ¹³⁷Cs < <u>DL</u>

<u>Acute Inhalation, time of intake: 13/03/2011</u> Intake: I= 535 Bq ¹³¹I + 169 Bq ¹³⁷Cs E(50)= 4E-3 mSv (¹³¹I) + 8E-4 mSv (¹³⁷Cs)= <u>4.8E-3 mSv</u>







- **Poland** Contact person: Jakub Osko (NCBJ)
- 7 cases reported,
 - In-vivo Monitoringon March-June 2011
 - NCBJ WBC and IFJ PAN WBC
 - Thyroid counting (Ge detector, shielded room): ¹³¹I detected in 3 persons on March-April 2011, range of activities: 3 - 367 Bq in thyroid
 - WBC: ¹³⁷Cs in 7 persons (25-670 Bq) , ¹³⁴Cs in 3 persons (27-390 Bq)
 - Dose evaluation:
 - Case 86: Chronic ingestion, from 11/03 to 20/06/2011
 - **E(50)**= 13.8 μSv ¹³⁷Cs + 11.9 μSv ¹³⁴Cs = **25.7 μSv**









Czech citizens – Contact person: Pavel Fojtik (SURO) 8 cases reported, in Japan from March to July 2011

- WBC monitoring on April-June and September 2011 (WBC in Prague)
 - 6 persons with Activity of ¹³⁷Cs > DL, range of **30-200 Bq**. ¹³⁴Cs: **70-120 Bq**
 - No dose evaluation
- **Thyroid counting:** detector + collimator, DL = 29 Bq I-131 in thyroid
 - 2 cases with activity of ¹³¹I > DL (monitoring on 6 April). Volunteer rescue workers
 - **Dose Evaluation:** Acute Inhalation 19/May/2011 (1st day in Japan), ¹³¹I (Type F)
 - Case B: I= 1500 Bq ¹³¹I; E(50) = 1.15E-2 mSv; Hthyroid= 0.2 mSv
 Case C: I= 2700 Bq ¹³¹I; E(50) = 2.1E-2 mSv; Hthyroid= 0.4 mSv







EURADOS Survey: internally exposed persons

- Hungary:
 - Contact person: Imre Balashazy
 - 6 Hungarian citizend visited Fukushima NPP after the accident
 - Time of intake: 12-13 March 2011, Acute inhalation
 - 2 cases reported:
 - Thyroid counting: (1) 22/3/2011 and (2) 07/04/2011. DL= 50 Bq.
 - Case 1: (1) 424 ± 27 Bq ¹³¹I; (2) 153 ± 22 Bq ¹³¹I
 - Case 2: (1) 470 ± 26 Bq ¹³¹I; (2) 180 ± 22 Bq ¹³¹I
- Ukraine:
 - Contact person: Valentyna Vasylenko, Nat Research Centre for Rad Medicine
 - 4 cases reported,
 - WBC: ¹³⁷Cs: 53 361 Bq, on 21-23 March, 1 April and 21 November 2011
- Norway:
 - Contact person: Bjorn Lind (NRPA, Norway)
 - Thyroid counting, portable NaI(TI) detector. 3 cases with Activity in thyroid > DL
 - DL= 50 Bq I-131





CONCLUSIONS - EURADOS Survey (intakes detected in 176 persons):

- **EURADOS Survey:** Collection of information on the capabilities for in-vivo monitoring and dose assessment in European Internal Dosimetry Laboratories and services, in case of RN emergency
- Short-lived radionuclides:
 - ¹³²I and ¹³²Te only detectable few days after the accident.
 - ¹³¹I detected up to 2 months after the Fukushima Daiichi NPP accident
- Main gaps identified and improvements required:
 - Thyroid counting calibration not always available for in-vivo monitoring
 - In most of cases: just calibration for ADULTS not for children
- Assumptions for dose calculations:
 - Acute Inhalation. Few cases: chronic inhalation or ingestion,.
 - Time of intake: assumed on 12 March 2011 in many cases
- **European WBC**: similar results of in-vivo monitoring data (WBC and thyroid counting). Same level of Intakes and doses E(50) and Hthyroid
- All the Doses E(50) < 1 mSv, no health concern due to intakes of radioiodine and/or radiocaesium





Thank you very much for your attention!



