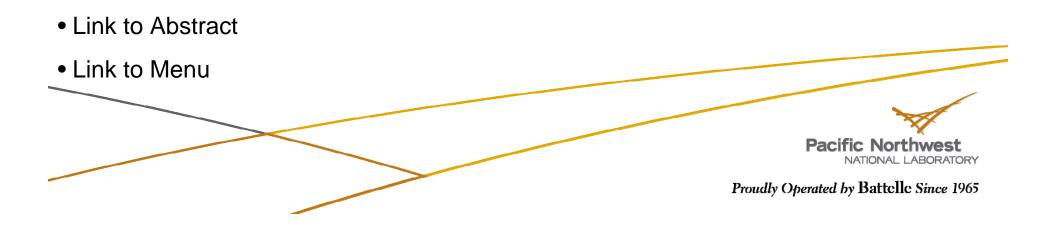
#### RADIATION DOSE RECONSTRUCTION: PRINCIPLES AND PRACTICES

#### **An NCRP Report**

**Bruce Napier** 



## **Report Contributors**

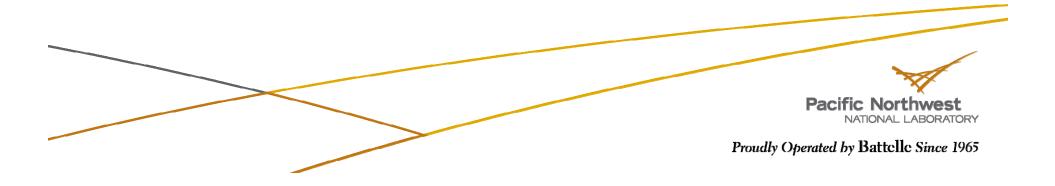
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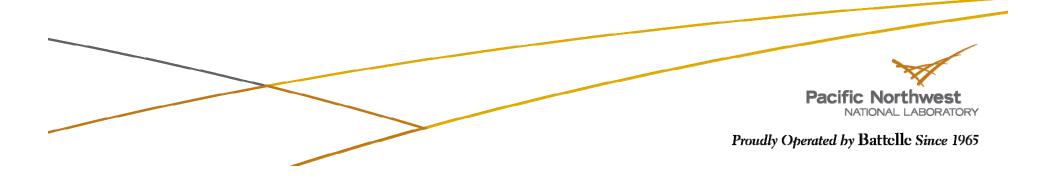
## Just a partial discussion today...

 Purposes of Dose Reconstruction
 Basic Elements / Foundation Issues
 Methodologic Issues
 Handling of Uncertainty for Epidemiological Inputs



# **Dose Reconstruction Defined**

Retrospective assessment of dose to identified or representative individuals or populations by any means



# **Dose Reconstruction Purpose**

- Dose reconstruction can be done for a variety of purposes
  - Compensation for occupational disease (NIOSH / EEOICPA)
  - Management of radiation emergencies (1976 Hanford americium accident)
  - Information for the public (NCI Fallout Study)
  - Epidemiological use (LSS, NTS, HTDS, Mayak)



## **Basic Elements/Foundation Issues**

- Definition of exposure scenarios/exposed groups
- Identification of exposure pathways
- Development and implementation of dose reconstruction methods
- Evaluation of uncertainties
- Presentation/interpretation of results
- \* Data and information
- \* QA/QC



## **Basic Elements – Exposure Scenarios**

Assumptions about conditions of exposure

- Conceptual representation of a situation of concern
- Description of individuals/populations
  - Characteristics
  - Activities
  - Time spent

Descriptions of the sources of radiation exposure



## **Basic Elements – Exposure Pathways**

Pathways of internal and external exposure

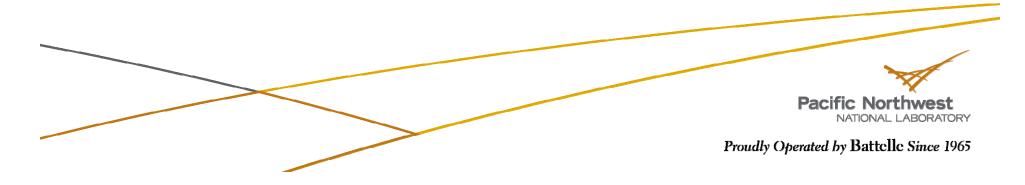
- Simple medical x-rays
- Complex environmental release, transport, deposition, transfer, uptake



## Basic Elements – Dose Estimation Methods (1)

#### Dosimetric quantity to be evaluated

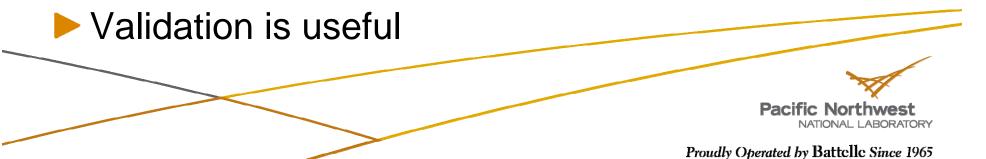
- Generally, absorbed dose to specific organs and tissues
  - Radiation protection quantities are often NOT appropriate!
- Frequently, time dependent
- Separation of low and high LET no "quality factor" or "radiation weighting factor"
- Separation of internal and external dose



#### **Basic Elements – Dose Estimation Methods (2)**

#### Model Use

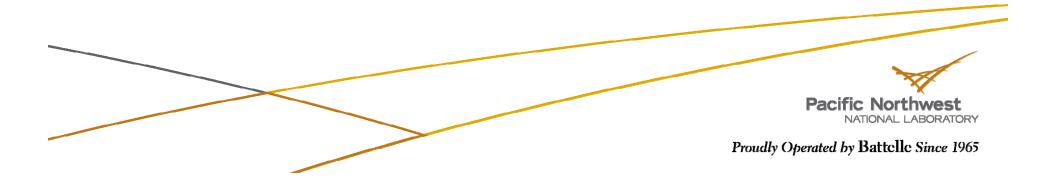
- Dosimeter reading conversions
- Calculation of energy spectra
- Physical mock-ups
- Medical symptoms
- Complexity of modeling should be commensurate with purpose and type, quality, and availability of data



# **Methodological Issues**

#### All computations use "models"

- Some are relatively simple converting a meter reading in uR/hr to an organ dose in Gy
- Some are complex converting an atmospheric release into an air concentration, deposition, and uptake by a cow into a concentration in milk consumed by a person



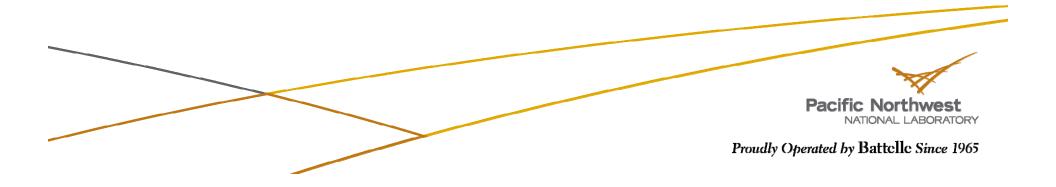
## **Dose Reconstruction Techniques**

Direct radiation measurements

Film badges, TLD

Indirect radiation measurements or estimates

- Environmental concentrations
- Biodosimetry
- Opportunistic dosimeters



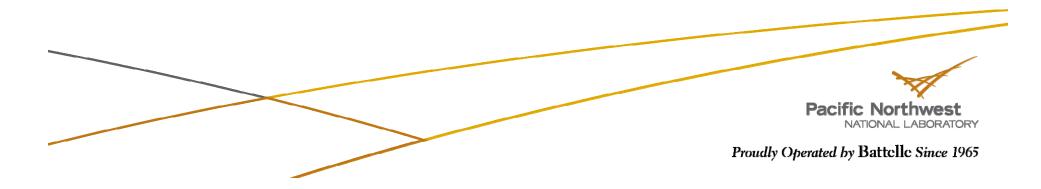
#### **Dose Reconstruction Techniques -Biodosimetry**

- Cytogenetic analyses (chromosome aberrations)
  FISH and others
- Genetic/molecular markers (Somatic mutations)
  - Glycophorin A
  - T-Cell antigen receptor (HPRT gene inactivation)
  - Micronucleus assay
- Electron Paramagnetic Resonance
  - Irradiation of hydroxyapatite (tooth enamel) produces stable paramagnetic radicals; linear dose/response 0.1 to 200 Gy



#### **Dose Reconstruction Techniques – Opportunistic Dosimeters**

- Luminescence natural TLD, OSL
  - Quartz crystals in bricks
  - Ceramics like glass (electrical insulators), pottery, false teeth
- Neutron activation
  - Radioactive
  - Accelerator mass spectroscopy isotopic ratios
    - Cl-36, Ni-63, Eu-152
- Track Etch
  - Glass, ceramic, plastic



### **Basic Elements – Estimation of Uncertainty**

ALL dose estimates are uncertain

- Lack of complete knowledge of exposure scenario
- Variability in relevant measurements
- Lack of knowledge of relevant processes
- Uncertainty can be random or systematic
  - Statistical fluctuations
  - Bias (e.g., calibration, desire for "conservatism")

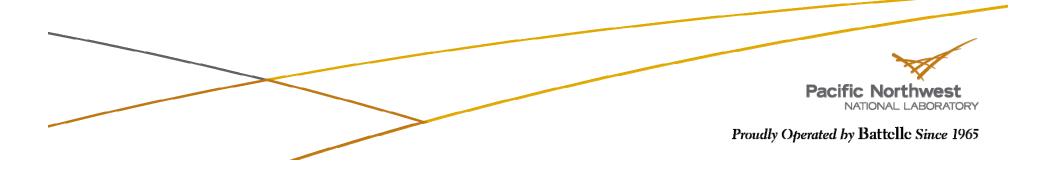
Essential purpose is to provide a credible range within which there is a high degree of confidence the "true" dose lies (We'll come back to this!)



# **Handling of Uncertainties**

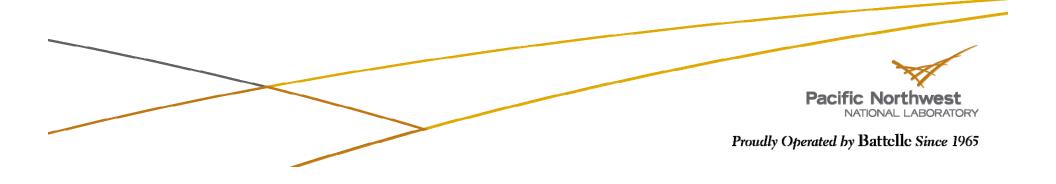
All estimates should address uncertainty

- If worst-case assumptions indicate small doses, detailed uncertainty analyses may be unnecessary
- In compensation programs, if reasonable upper-bound assumptions result in doses above a threshold, detailed uncertainty analyses may be unnecessary
- But in epidemiological applications, best estimates are needed, thus a realistic description of uncertainty is required



#### Use of Dose Uncertainty in Epidemiology is Rapidly Changing

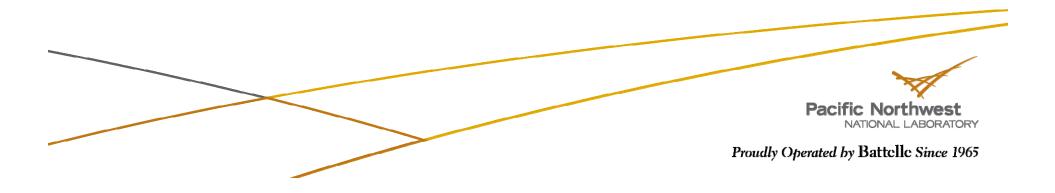
- In the mid-1990s, dose/effect estimates did not use dose uncertainties
- Today, the use of dose distributions is the state of the art, via maximum-likelihood estimation
- The biostatisticians know about Berkson errors, and have asked that they be identified – but don't yet know what to do with them



## **Basic Elements – Presenting Results**

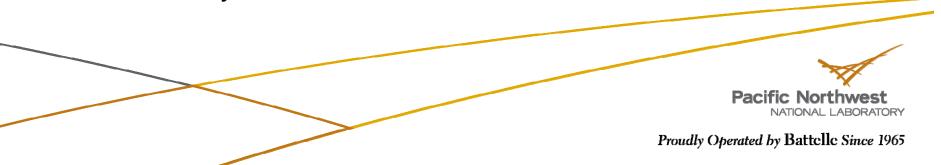
#### During the work:

- Peer reviews (SRG for JCCRER)
- Interested parties
  - At Mayak, the combined JCCRER projects have over 200 peer-reviewed open-literature publications
- Describing conclusions
  - Interpret by discussing in the context of the objectives
  - Usually, journal articles are NOT the endpoint; epidemiology, legal uses, etc.



## **Basic Elements - Data**

- Describe characteristics, locations, activities of people
- Describe sources of radiation
- Identify pathways of exposure
- Can be a major challenge if dealing with tens of thousands of people
- Human subjects privacy is important
- Can be especially important in time-sensitive dose reconstructions – accidents
- Data validity is often not obvious



# **Basic Elements – QA/QC**

- Approaches may vary for research, legal, or accident situations
- Documentation of sources, assumptions
- Computer code verification
- Standard operating procedures



# Summary

#### Basic Elements of Dose Reconstruction

- Definition of exposure scenarios/exposed groups
- Identification of exposure pathways
- Development and implementation of dose reconstruction methods
- Evaluation of uncertainties
- Presentation/interpretation of results
- \* Data and information
- \* QA/QC



# Summary

No two dose reconstructions are alike
 But they have many common features
 Use all of the data you have available
 Estimate uncertainties

