October 31, 2005

The Honourable Debra Higgins,  
Minister of Labour,  
Legislative Building,  
Regina, Sask.,  
S4S 0B3

Dear Hon. Higgins:

Thanks for your letter of October 11/05 regarding health risks to uranium miners.

I am glad that you and your Department now accept the findings of BEIR VII, that there is no safe threshold for alpha radiation.

The next thing will be to watch whether you and your staff actually change any of your policies and practices, or whether it will be "business as usual."

I see that, like CNSC, you authenticate your position by reference to Dr. Geoffrey HoweNthe well-known epidemiologist.

I wonder what he now thinks of how SENES and CNSC twisted his words?

The Ontario Miners' Study (1989) discovered that uranium miners had a 3.1 times increased risk for cancer over the average citizen. Has this been told to the miners in northern Saskatchewan?

This was one of the reasons that Dr. Don Lee, chairperson of the Federal-Provincial Review Panel (1993) was so pleased to discover that an interdisciplinary
epidemiological team was to be set up to discover what was actually happening to the Sask. miners!

Now why was the figure of five or ten times the current risk models brought into the picture? This is what Dr. Howe is being asked to assess. Read his own words in the Feasibility Study (p.3-2). "In this case, one can rephrase the power question as to whether or not one has the power to detect a risk which is perhaps five or ten times greater than that predicted by current risk models. If this is the case, the study thus, has the power to ascertain whether these particular miners have some unexpected unusually high risk." (emphasis mine)

Where is all this emphasis about unexpected unusually high risk coming from? Would it not be informative or helpful to know if the Sask. Miners are running a risk of 2 or 3 or 4 times the current rate of risk let alone five or ten times the risk, and an "unexpectedly unusually high risk"? There is more going on in this little episode than "absence of statistical power"!!

Did you go on to read his additional wordsÑ"This is not to say there are strong a priori hypothesis to expect either of the above phenomena, but one could argue that those doing a potentially risky job have the right to be monitored to ensure that their health is not being adversely unexpectedly affected." (Feasibility Study, p. 3-2)

SENES, CNSC, and Sask. Labour never said much about that paragraph did they? They picked out the sections to help them make the case they had already decided upon.

I see that you are also using the "dodge" of CNSC and SENES in saying that one cannot discern effects between the radon progeny in the miners' home basements, and the radon progeny in the mines. This concern did not seem to derail the Ontario Miners Study.

I do not think you have enough scientific evidence to claim that residential radon detracts from making an assessment of radon effects in uranium mines. The statements in the Feasibility Study (pp. 2-1,4-8, 6-1) certainly do not make a convincing case.

A ten year old study of the Humboldt area, plus generalized statements about Regina and Saskatoon, certainly give no pertinent data or evidence about the homes of the miners who come from many different places in Saskatchewan.

You say that Sask. Labour continues to monitor radiation exposure of miners. You write," This monitoring,
together with current government regulations, will ensure the protection of workers' health and safety." But how will this happen? How will you know? The Institute of Radiation Safety in Saskatoon keeps reading and tracking and saving the results from the miners' alpha dosimiters. However, if the miners are receiving low doses, and if a low dose damages some chromosomes in a miner's lung, and if it does not react as a cancer for 5 or 10 or 15 years, how will your system protect the miner? I think the BEIR VII findings have upstaged and discredited your whole approach.

You may remember that AECL for years has monitored the low doses received by its staff members. However, the American Journal of Epidemiology (Vol. 128, No.6, p. 1366), out of John Hopkins University, followed 13,570 employees of AECL for 31 years (1950-1981), and found that 882 males and 66 females had died from lung cancer. So, how did the monitoring of low level radiation doses among the AECL workers protect them?

Yours truly,

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Copies to:

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