



September 19, 2005
The Hon. Debra Higgins,
Minister of Labour,
The Legislative Building,
Regina, SK.
S4S 0B3

Dear Hon. Higgins:

A new benchmark has been added to the knowledge of radiation and uranium mining.

You have probably noted the recent findings of BEIR VII (Biological Effects of Ionizing Radiation), a sub-committee of the National Academy of Science.

Dr. Richard R. Monson, the panel chairpersons and professor of epidemiology at Harvard's School of Public Health, made this statement: "The scientific research base shows that there is no threshold of exposure below which low levels of radiation can be demonstrated to be harmless or beneficial."

I suggest that you, your staff, and the uranium corporations need to revise your attitudes, policy, and practice in regard to low level radiation.

You and your staff need to do more of your own critical analysis, and not simply adopt the public relations "spin" of the CNSC staff and their consultants.

In its efforts to quash the epidemiological study of current Saskatchewan miners, the CNSC staff misrepresented some of the facts and statements made by specialists.

The Summary Statement of the Feasibility Study

concluded: "With perfect information on exposures and correct baseline cancer studies, there is almost no chance that an epidemiological study would detect a statistically significant excess risk due to radon exposure." (p. S-1)

So, what is an excess risk? Previous studies by Ontario Labour concluded that uranium mine and mill workers had a three times higher risk of contracting lung cancer from alpha radiation than ordinary citizens.

The Atomic Energy Corporation Ltd., (AECL) has always monitored the low level radiation doses received by its workers. Yet the American Journal of Epidemiology found that out of 13, 570 employees, there had been 882 male deaths, and 66 female deaths. (Vol.128. No. 6) Therefore, on what basis do you say that it would not be possible to link any cancers among workers to their occupational radon exposures? The Feasibility Study quotes a well-known epidemiologist, Dr. Geoffrey Howe:

"Therefore, the decision as to whether or not to carry out such a study hinges on the second objective, i.e. that of occupational health. 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 the current risk models. If this is the case, the study, thus has the power to ascertain whether these particular miners have an unexpected unusually high risk." (p. 3-2)

". . . 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." (p.3-2)

So, what is an excess risk? If the risk to current miners and mill workers is 4 or 5 times that of the ordinary citizen, even though not proven to be 10 times the current risk model, should they not be told what it actually is proving to be?

Your staff, and the CNSC staff and their consultants, have been assuming that low doses monitored by dosimeters on miners means that there is low risk involved. Now, the recent BEIR finding disqualifies that assumption.

In my view, the CNSC staff twisted and misrepresented several factors, and your staff and the press repeated these conclusions to an unfortunate degree.

I urge your Dept. and the Saskatchewan Government to do its own epidemiological study to discover what is

actually happening to our miners, and to be more forthright with those miners about the risks involved.

Yours truly,

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