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***Strontium-89, Strontium-90, and Cesium-137 A European Intercomparison of Methods Used for the Assessment of Intakes of Internally Deposited Radionuclides DTPA A European Intercomparison of Methods Used for the Assessment of Intakes of Internally Deposited Radionuclides Effects of Internally Deposited Plutonium-239 on the Lymphatic Tissue of Dogs The Late Effects of Internally-deposited Radioactive Materials in Man Genetic Effects from Internally Deposited Radionuclides Medical Therapy for Internally Deposited Radioisotopes The Determination of Internally Deposited Radioactive Isotopes in the Marshallese People by Excretion Analysis Comparison of Bone Cancer Risks in Beagle Dogs for Inhaled Plutonium-238 Dioxide, Inhaled Strontium-90 Chloride, and Injected Strontium-90 Radioisotopes in the Human Body HEALTH RISKS OF RADON AND OTHER INTERNALLY DEPOSITED ALPHA EMITTERS, BEIR 4 Cancer Mortality of Rockwell Workers Exposed to External Low-level Ionizing Radiation and Internally-deposited Radionuclides Health Effects of Exposure to Low Levels of Ionizing Radiation Evaluation of the efficacy of different metal chelates of DTPA in removing internally-deposited radionuclides***

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***This book describes hazards from radon progeny and other alpha-emitters that humans may inhale or ingest from their environment. In their analysis, the authors summarize in one document clinical and epidemiological evidence, the results of animal studies, research on alpha-particle damage at the cellular level, metabolic pathways for internal alpha-emitters, dosimetry and microdosimetry of radionuclides deposited in specific tissues, and the chemical toxicity of some low-specific-activity alpha-emitters. Techniques for estimating the risks to humans posed by radon and other internally deposited alpha-emitters are offered, along with a discussion of formulas, models, methods, and the level of uncertainty inherent in the risk estimates. There is a continuing need to understand dose-response relationships for ionizing radiation in order to protect the health of the public and nuclear workers from undue exposures. However, relatively few human populations have been exposed to doses of radiation high enough to cause observable, long-term health effects from which to derive dose-response relationships. This is particularly true for internally deposited radionuclides, although much effort has been devoted to epidemiological studies of the few types of exposures available, including lung cancers in uranium miners from the***

***inhalation of the radioactive decay products of Ra, liver cancers in patients injected with Thorotrast X-ray contrast medium containing Th, bone cancers in radium dial painters who ingested Ra, and bone cancers in patients who received therapeutic doses of Ra. These four types of exposures to internally deposited radionuclides provide a basis for understanding the health effects of many other radionuclides for which a potential for exposure exists. However, potential exposures to internally deposited radionuclides may differ in many modifying factors, such as route of exposure, population differences, and physical, chemical, and elemental forms of radionuclides. The only means available to study many of these modifying factors has been in laboratory animals, and to then extrapolate the results to humans. Three conclusions can be drawn from this example. Annotation This one-hundred-and-second volume of the IARC Monographs contains evaluations of the carcinogenic hazard to humans of radiofrequency electromagnetic fields. This is the second volume on non-ionizing radiation, after Volume 80 (Static and Extremely Low-Frequency (ELF) Electric and Magnetic Fields; IARC, 2002), and the fourth and last in a series on physical agents, after Volume 75 (Ionizing Radiation, Part 1: X- and Gamma-radiation, and Neutrons; IARC, 2000) and Volume 78 (Ionizing Radiation, Part 2: Some Internally Deposited Radionuclides; IARC, 2001). Solar radiation and ultraviolet radiation were evaluated in Volume 55 (IARC, 1992). The types of radiation evaluated as human carcinogens (Group 1) were revisited in Volume 100D (IARC, 2012). The topic of this Monograph is the evaluation of the carcinogenicity of radiation in the radiofrequency (RF) range (30 kHz to 300 GHz) of the electromagnetic spectrum. This type of radiation is emitted by devices used in wireless telecommunication, including mobile phones, and by many other sources in occupational and general environmental settings. Exposures are ubiquitous in more developed countries and rapidly increasing in the developing world, in particular with***

***respect to the use of mobile phones. There is rising concern as to whether exposure to RF radiation emitted by a mobile phone affects human health and, specifically, whether mobile-phone use increases the risk of cancer of the brain. The general public, manufacturers, regulatory authorities and public health agencies are seeking evidence on the safety of mobile-phone use. Consequently, there has been intense interest in the development and outcome of this IARC Monograph. This interest reflects the high prevalence of exposure (which increasingly extends to children), the vast scope of the telecommunications industry, the findings of some epidemiological studies that suggest an increased risk of cancer, and a high level of media coverage of the topic of mobile phones and cancer. Although the preparation of this Monograph had been scheduled so as to include the results of the large international case-control study INTERPHONE on mobile-phone use (conducted in 2000-2004; published in 2010), it should be emphasized that the evaluations in this volume address the general question of whether RF radiation causes cancer in humans or in experimental animals: it does not specifically or exclusively consider mobile phones, but rather the type of radiation emitted by mobile phones and various other sources. Furthermore, this Monograph is focused on the potential for an increased risk of cancer among those exposed to RF radiation, but does not provide a quantitative assessment of any cancer risk, nor does it discuss or evaluate any other potential health effects of RF radiation. COMMITTEE ON THE BIOLOGICAL EFFECTS OF IONIZING RADIATIVES. This monograph evaluates the evidence for carcinogenicity of ionizing radiation from internally deposited radionuclides. The radionuclides considered in this monograph belong to two broad categories: those that emit  $\alpha$ -particles (helium nuclei) and those that emit  $\beta$ -particles (electrons) during their primary radioactive decay. For purposes of this monograph 'internally deposited' refers to radionuclides in dispersed forms (e.g. dusts suspensions solutions or gases) that***

***enter the body through inhalation ingestion by some form of injection or in some cases by percutaneous absorption. Radionuclides may also enter tissues within removable objects, such as radioactive beads needles etc. that may be implanted surgically for therapeutic purposes or other kinds of fragments implanted accidentally. These kinds of exposures are not considered in this volume. Also not considered are radionuclides (e.g. iron-55 gallium-67) which undergo radioactive decay through processes that do not include emission of either a or b particles. Radon and its decay products were previously evaluated in IARC Monographs Volume 43 (1988) as carcinogenic to humans (Group 1). The subsequently published scientific literature on occupational and residential exposures to radon was reviewed and included in this volume as an update but no re-evaluation of radon was considered necessary. Six specific radionuclides of the elements radium thorium plutonium and phosphorus plus mixed radionuclides of iodine were evaluated as carcinogenic to humans (Group 1) on the basis of sufficient evidence for increased risk of cancer in exposed individuals. These include radium-224 radium-226 radium-228 thorium-232 (administered in colloidal form as thorium-232 dioxide) plutonium-239 (exposure to which also entails exposure to plutonium-240 and other isotopes of plutonium) radioisotopes of iodine including iodine-131 and phosphorus-32. Evidence for increased cancer risk in exposed humans is from medical usage in the cases of radium-224 thorium-232 and phosphorus-32 and from occupational or accidental/environmental exposures for plutonium-239 radium-226 and radium-228 and the radioiodines. In addition the global evaluations of two broad categories of internally deposited radionuclides were made on the basis of carcinogenicity in experimental animals plus other relevant data: Internally deposited radionuclides that emit a particles are carcinogenic to humans (Group 1). Internally deposited radionuclides that emit b particles are carcinogenic to humans (Group 1). Ionizing***

***Radiation Part 1: X-and Gamma (g) Radiation and Neutrons***  
***Volume 75 of the Monographs addressed the carcinogenic potential of external X-rays g-rays and neutrons in exposed populations (see overleaf). Radioisotopes in the Human Body: Physical and Biological Aspects provides a unified presentation of the manner in which radioisotopes are deposited in the human body. This book focuses on bone structure and the irradiation of bone because so many of the available radioisotopes are deposited in bone. Organized into nine chapters, this book begins with an overview of the physical considerations that are significant to the dosimetry of internally deposited radioisotopes. This text then examines the structure and formation of bone in some detail. Other chapters consider the importance of bone in relation to potential radiation damage. This book discusses as well the relationship between radiation dose and radiobiological effects. The final chapter deals with the case of internal irradiation by radioisotopes. This book is a valuable resource for biologists, health physicists, scientists, and students. Radiation protection officers and individuals who have responsibilities for the safe use of radioactive substances will also find this book useful. This book reevaluates the health risks of ionizing radiation in light of data that have become available since the 1980 report on this subject was published. The data include new, much more reliable dose estimates for the A-bomb survivors, the results of an additional 14 years of follow-up of the survivors for cancer mortality, recent results of follow-up studies of persons irradiated for medical purposes, and results of relevant experiments with laboratory animals and cultured cells. It analyzes the data in terms of risk estimates for specific organs in relation to dose and time after exposure, and compares radiation effects between Japanese and Western populations. Evaluates the evidence for carcinogenicity of ionizing radiation from internally deposited radionuclides. The radionuclides considered belong to two broad categories, those that emit  $\alpha$ -particles (helium nuclei) and those***



*that emit b-particles (electrons).*

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