

Fukushima and the Battle for Truth

Large sectors of the Japanese population are accumulating significant levels of internal contamination

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Fukushima's nuclear disaster is a nightmare. Ghostly releases of radioactivity haunt the Japanese countryside. Lives, once safe, are now beset by an ineffable scourge promising vile illness and death.

Large sectors of the population are accumulating significant levels of internal contamination, setting the stage for a public health tragedy.

A subtle increase in the number of miscarriages and fetal deaths will be the first manifestation that something is amiss. An elevated incidence of birth defects will begin in the Fall and continue into the indefinite future. Thyroid diseases, cardiac diseases and elevated rates of infant and childhood leukemia will follow. Over the next decade and beyond, cancer rates will soar.

Chernobyl was the harbinger of this heartbreaking scenario. It taught mankind the inescapable biological truths that emerge within populations internally contaminated by heightened levels of fission products. And yet, government and industry schemers attack these truths as unfounded scare-mongering. With cold indifference, they deny that Chernobyl was a mass casualty event. They turn a blind eye to a huge body of research and deviously proclaim that no evidence exists that more than a handful of people suffered harm from the Ukrainian disaster. They publish propaganda, draped in the guise of science, that dismisses the hazard of low levels of internal contamination. Believing their subterfuge to have been successful and intoxicated by their hubris, they are already positioning themselves to stage-manage the public's perception of Fukushima.

Japan's government, its Nuclear Safety Commission, and the Tokyo Electric Power Company have already demonstrated that they will do everything in their power to keep citizens ignorant of what is taking place. The emerging health crisis is scheduled to be erased. Following a time-tested blueprint worked out by prior radiation releases around the world, data relevant to assessing the medical impact of the accident will not be gathered. Radiation doses to the population will be woefully underestimated. The hazards associated with low levels of internal contamination will be obliterated from all discussions of risk. Academic journals that support the nuclear agenda will be flooded with bogus studies demonstrating that no health detriment was suffered by the population. The heightened incidence of childhood leukemia will be attributed to some as yet unidentified virus unleashed by population mixing following the evacuations caused by the tsunami. (This theory is currently in vogue to deny that the heightened incidence of leukemia among children under five years of age living nearby to nuclear reactors is radiation induced.) The

birth defects will be summarily dismissed as impossible because the risk models upheld by the International Commission on Radiological Protection don't predict them. The possibility that the models are fraudulently constructed escapes consideration. (See a *Betrayal of Mankind by the Radiation Protection Agencies*, available as a free download at <http://www.du-deceptions.com/excerpts.html>.)

How is TRUTH to gain ascendancy when blocked by this institutionalized matrix of deceit? What agency can possibly take the lead to accurately document the full scope of the disaster, identify its victims and those at risk, and publish trustworthy public health information? Who is going to take responsibility to protect the children? To wait for the government to come to the rescue is naive. The history of radiation accidents testifies that governments routinely betray their citizens in deference to their nuclear weapons program and the nuclear industry. No, only one alternative is open to the people of Japan. They must become proactive. They must seize the initiative and wrest control from government and industry of the "*perception*" of the catastrophe.

The accident at Fukushima demands that a peoples' campaign be initiated to produce an honest assessment of the current situation, catalog the medical consequences as they emerge, and offer accurate advice as to how citizens can protect themselves. Using the internet as a platform, scientists from all relevant disciplines must band together with interested laypeople with something valid to contribute to create a widely distributed open source research project. The evolving online encyclopedia will archive all pertinent data and preserve it from future tampering. The accident from its inception must be documented. With published reports frequently in conflict with one another, all available information, whether from government sources, citizen investigators or eyewitnesses, must be gathered for future evaluation. Worldwide meteorological data since March 11 must be assembled. All official and unofficial measurements of radiation in the environment, both in Japan and worldwide, must be collected and collated. This is essential information required for future epidemiological studies. Contaminated agricultural areas must be identified. Samples of all edible material for human and animal consumption must be evaluated for safety. As suspected radiation-induced illness begins to appear in the population, healthcare providers and victims must make public their experiences. Initially, this information will be anecdotal but nonetheless invaluable. It will identify emerging trends of morbidity and mortality and define population subgroups requiring more systematic scientific investigation. Researchers working alone or in groups must seize the initiative to pursue study in their fields of expertise and interest. (One excellent suggestion by Gordon Edwards of the Canadian Coalition for Nuclear Responsibility is the widespread collection of babies' teeth to provide objective data on the geographic dispersion and uptake of strontium-90 [1].) Methodologies, data and results need be posted online as they become available. Free access to the whole body of work must be guaranteed so as to allow scrutiny by people from all over the world. Transparency must be paramount. An open dialogue will allow divergent points of view to be fairly represented. Disagreements over research protocols or the interpretation of results will point the way to new avenues of investigation where clarification and consensus might be achieved. Objective investigation via the scientific method will be the final arbitrator of truth. The ultimate goal of this effort will be to produce an unbiased determination of the public health consequences of radiation released into the environment, assess the accuracy of current standards of radiation safety and identify how improvements can be made for the common welfare of humanity.

It is urgent that this initiative commence immediately. Data must be captured while it remains untainted. Of particular importance is the securing of pre-accident health statistics for the population of Japan. Rates for various pregnancy outcomes; the frequency of different types of birth defects; the incidence of thyroid diseases, heart diseases, cancers and so forth, all must be cataloged. There is good reason why this baseline data need be preserved. The history of radiation accidents is littered with examples of the outright falsification of data that has prevented an honest evaluation of the effects of low levels of internal contamination on human health. For instance, evidence exists that morbidity and mortality data published by the U.S. Government's Public Health Service was altered in the wake of radiation releases from nuclear weapon production facilities and commercial nuclear power plants so as to hide cancer deaths in the population [2]. The accident at Three Mile Island, persistently painted by government and industry spokesmen as a benign event, in fact produced illness and death among humans and farm animals downwind [3,4]. After the accident at Chernobyl, hundreds of thousands of so-called "liquidators" participated in cleanup operations in close proximity to the destroyed reactor and also built a concrete sarcophagus around the reactor building to entomb the radiation. According to the European Committee on Radiation Risk (ECRR), in subsequent years this population was reported as having a *lower* rate of leukemia than the general population. Only later did it come to light that Soviet doctors were forbidden from recording leukemia in their diagnoses [5]. The Wales Cancer Registry was cited by the ECRR as excising cases of cancer from its database so as to prevent the Sellafield nuclear fuel reprocessing facility in the U.K. from being blamed for causing illness to the population. Also mentioned by ECRR was the alteration of infant mortality figures in Germany after Chernobyl so as to mask the impact of the accident on public health [5].

Mischief has not been confined to falsifying health records. In 1957, a fire broke out in the graphite reactor at Windscale, England on the site now occupied by the Sellafield facility. The amount of radiation released and the incidence of cancer induced in the population of Ireland has remained fiercely contentious issues. According to the ECRR, at some point after the fire, meteorological records were altered "with the apparent motive of concealing the likely location of any effects" [5]. Similarly, the Monju prototype fast-breeder reactor in Tsuruga, Japan suffered a devastating fire in 1995. Prefecture and city officials found that the operator had tampered with video images of the fire to hide the scale of the disaster [6].

If an accurate documentation of the health consequences of Fukushima is to succeed, one condition is paramount: the project **MUST** retain its independence from the international agencies that currently dominate the discussion of radiation effects. The tacit mandate of these organizations is to support nuclear weapons programs and the nuclear industry, and they do so by publishing fraudulent scientific studies that downplay the hazards to health of radioactive material released into the environment. For example, the World Health Organization (WHO), the International Atomic Energy Agency (IAEA), the United Nations Scientific Committee on the Effects of Atomic Radiation (UNSCEAR) and other UN organizations jointly published *Chernobyl's Legacy: Health, Environmental and Socio-economic Impacts* [7]. This study is routinely cited as proof that Chernobyl had little impact on public health. It concluded that only twenty-eight first responders died from acute radiation syndrome and 4,000 children developed thyroid cancer, fifteen of whom died by 2002. In addition, it *estimated* that an additional 4,000 fatal cancers *might* arise in the overall population. This sanitized version of the catastrophe was reached by the devious method of consulting only 350 sources of information, mostly published in English, while

ignoring 30,000 publications and 170,000 sources of information available in languages other than English [8]. A summary of this large body of literature, published as *Chernobyl: Consequences of the Catastrophe for People and Nature*, concluded that radiation-induced casualties approached 980,000 [9].

To offer a second example, a number of prestigious institutions have published disinformation on the hazards to health of depleted uranium weapons. These include WHO, IAEA, the European Commission, the Royal Society in the U.K., the Agency for Toxic Substances and Disease Registry in the U.S., the Rand Corporation, and the Health Physics Society [10,11,12,13,14,15,16]. All concluded that weaponized uranium creates no adverse health effects when internalized by soldiers on the battlefield and downwind populations. Justification for this conclusion came from a survey of the scientific literature regarding uranium contamination among workers in the uranium and nuclear industries and populations exposed to elevated levels of uranium in their drinking water. Historically, the only two types of adverse health effects documented among these populations is altered kidney function due to uranium's chemical toxicity and cancer due to uranium's radioactivity. But studies of veterans suffering from Gulf War Syndrome reveals no evidence of kidney disease. And according to models promulgated by the International Commission on Radiological Protection (ICRP), the radiation dose from battlefield uranium is too low to initiate cancer. The conclusion? Case closed! DU cannot be a factor in the severe suffering of veterans or the increased incidence of cancer and birth defects in Fallujah and other areas of Iraq. As convincing as the logic of these studies attempt to be, they all suffer from fatal flaws. They all fail to acknowledge that combustion-derived micro- and nano-sized particles of uranium have unique biokinetics when internalized that are not comparable to historical types of uranium exposure, and they quit cleverly fail to take into account the most up-to-date research on the toxicology of uranium. New research conducted since the first Gulf War has demonstrated that uranium is genotoxic (capable of damaging DNA), cytotoxic (poisonous to cells), mutagenic (capable of inducing mutations), teratogenic (capable of interfering with normal embryonic development) and neurotoxic (capable of harming nerve tissue). This research has yet to dislodge the stale mantra that uranium is only capable of causing kidney disease and cancer. (For a thorough disclosure of the fraudulent science used to discount the hazards of DU and a summary of recent research on the toxicology of uranium, see this author's "The Harlot of Babylon Unmasked: Fraudulent Science and the Cover-Up of the Health Effects of Depleted Uranium" in *A Primer in the Art of Deception* available at <http://www.du-deceptions.com/> [17].)

Mischief also infects the radiation protection community. The Radiation Effects Research Foundation in Hiroshima conducts ongoing medical research on the health of the survivors of the atomic bombings at the end of WWII. The Life Span Study is the single most important piece of evidence used by the ICRP for setting worldwide guidelines for radiation safety. That radiation safety for all types of exposure and all manner of radiation-induced illnesses relies so heavily on this research is incredibly disturbing because the Life Span Study is deeply and irreparably flawed. Initiated five years after the bombings, after tens of thousands of victims succumbed to unidentified levels of radiation exposure, results are hopelessly skewed in favor of finding radiation less hazardous than it in fact is. Further, the study can provide no meaningful information on the birth outcomes to fetuses exposed *in utero*. More problematic is the fact that both the study and the control groups were internally contaminated by the black rain that showered down upon the destroyed cities after the blasts. This unacknowledged contamination of the control group hopelessly

compromises any meaningful conclusions of the rates of radiation-induced illnesses in the study group. The Life Span Study is plagued by numerous other flaws that raise serious questions as to why it has become the centerpiece of radiation standards. (For further information on this topic, consult Exhibit C in the aforementioned free download at http://www.du-deceptions.com/downloads/Betrayal_Chap6.pdf.)

The Japanese have been victimized by nuclear horror more than any other people on Earth. Today they are immersed in an imperceptible tragedy that will slowly but inevitably bring disease and heartbreak to millions. In response to this crime, a rare and courageous opportunity exists. By undertaking a national campaign to honestly document the disaster that is engulfing them, they can lead all of humanity to break through the quagmire of deception and deceit that has allowed nuclear weapons and reactors to flourish. Truth finally has an opportunity to triumph over falsehood. In some small but significant way, this would be fitting repayment for the malevolence of Hiroshima, Nagasaki and Fukushima.

Paul Zimmerman is the author of *A Primer in the Art of Deception: The Cult of Nuclearists, Uranium Weapons and Fraudulent Science*. A more technical, fully referenced presentation of the fraudulent nature of current radiation standards and the coverup of the effects of depleted uranium weapons can be found within its pages. Excerpts, free to download, are available at www.du-deceptions.com.

Notes

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