

# Health Imperialism and Discriminatory International Laws

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*“Hypocrisy can afford to be magnificent in its promise, for never intending to go beyond promise costs nothing.” – Edmund Burke*

Joe Biden’s statements on resuscitating the 2015 Joint Comprehensive Plan of Action (JCPOA) has also reignited an old debate inside Iran. With the Rouhani administration clearly siding with those pushing for unconditional return to the ‘deal’ signed with the U.S. and five other world powers, it is important to discuss what is at stake – specifically as it relates to medical isotopes and Iran’s enrichment needs.

While the United States and its western ‘allies’ demand that Iran stop all enrichment of up to 20% for its research reactor and medical isotopes, the US government has continued its efforts to commercialize nuclear medicine.

In 2011, while the Obama administration was busy talking in secret with the ‘reformist’ groups attempting to influence and undermine Iran’s rights under the Non-Proliferation Treaty (NPT), the U.S. Congress passed the “[American Medical Isotopes Production Act of 2011](#)” . The Bill calls for providing uranium to private sector companies to make medical isotopes with U.S. government undertaking the task of waste removal: “The lease contracts shall provide for the Secretary to retain responsibility for the final disposition of radioactive waste created by the irradiation, processing, or purification of leased uranium.” It is important to read the entire Bill here: [E:\BILLS\S99.IS \(govinfo.gov\)](#)

Under Section 6 titled ‘DOMESTIC MEDICAL ISOTOPE PRODUCTION’, the Bill stipulates:

“(a) In General.— Chapter 10 of the Atomic Energy Act of 1954 ([42 U.S.C. 2131 et seq.](#)) is amended by adding at the end the following:

“Sec. 112. Domestic Medical Isotope Production.

“a. The Commission may issue a license, or grant an amendment to an existing license, for the use in the United States of highly enriched uranium as a target for medical isotope production in a nuclear reactor, only if, in addition to any other requirement of this Act.”

Clearly not a proliferation concern. America is the arbitrator of international treaties – it would seem with cooperation from other powers. But Iran’s uranium enriched to 19.75% – considered to be LEU and necessary for research reactors and medicinal purposes – has to be halted.

Through National Nuclear Security Administration, the U.S. is monopolizing and handing

control over global medical isotope production to profit-driven companies. Here is the statement published on [NNSA's website](#):

“As part of its mission to minimize the use of highly enriched uranium (HEU), NNSA's Office of Material Management and Minimization was tasked to lead the Molybdenum-99 (Mo-99) program. Mo-99 is an isotope that is used in over 40,000 medical procedures in the United States each day, but is 100% supplied by foreign vendors, most of which use HEU in the production process.”

It also identifies four private companies currently working with the U.S. government:

NorthStar Medical Radioisotopes, LLC, located in Beloit, Wisconsin

- SHINE Medical Technologies, located in Janesville, Wisconsin Northwest
- Medical Isotopes, located in Corvallis, Oregon
- Niowave, Inc., located in Lansing, Michigan”

Medical isotopes are a lucrative, growing business and one that is essential to human health.

Radiotherapy can be used to treat some medical conditions, especially cancer, using radiation to weaken or destroy particular targeted cells.

- Over 40 million nuclear medicine procedures are performed each year, and demand for radioisotopes is increasing at up to 5% annually.
- Sterilization of medical equipment is also an important use of radioisotopes

The global radioisotope market was valued at \$9.6 billion in 2016, with medical radioisotopes accounting for about 80% of the total, and poised to reach about \$17 billion by 2021. North America is the dominant market for diagnostic radioisotopes with close to half of the market share, while Europe accounts for about 20%. Hence, 70% of the global medical radioisotopes goes to a population of 778 million people (US 331 and EU 447 million) while 7 billion (global population 7.8 billion less US and EU) are left with only 30%.

Where there is health imperialism, profit, and discrimination, there is Bill Gates. [According to the Journal of Economics and Sociology \(2015\)](#), Bill Gates, the single biggest contributor to World Health Organization (WHO):

“Gates calls for discussion “about which parts of the process [WHO] should lead and which ones others (including the World Bank and the G7 countries) should lead in close coordination.” While the article contains perfunctory nods to U.N. authority, as well as brief lip service to the idea of strengthening public health services in poor countries, there can be little doubt that Gates is advocating a new form of international institution, transcending the United Nations, targeting the developing world, and effectively controlled by the wealthy nations of the West”.

It comes as no surprise therefore that Gates is involved with nuclear medicine.

“[TerraPower](#), the nuclear research venture founded by Bill Gates, is joining with Isotek Systems and the U.S. Department of Energy in a public-private partnership aimed at

turning what otherwise would be nuclear waste into radiation doses for cancer treatment.”

Such benevolence. But sovereign signatory nations party to the NPT are not permitted to cure their sick.

Furthermore, the more affluent people living in countries with limited access to nuclear medicine, find their way to the US or the EU for treatment, benefiting from their affluence while taking their home country’s wealth to the West. And the gap is only growing.

In the USA there are over 20 million nuclear medicine procedures conducted per year, and in Europe about 10 million. In Australia there are about 560,000 per year, with 470,000 using reactor isotopes. The use of radiopharmaceuticals in diagnosis is [growing at over 10% per year](#).

But in spite of the dire shortage of medical isotopes as reported by [IAEA report – April 2020](#), JCPOA and the signatories, are demanding that Iran not produce this life-saving nuclear medicine.

The degree of double standards and hypocrisy cannot be emphasized enough. Only [10 nuclear reactors](#), many of which are nearing 50 years of operation, produce over 95% of the world’s supply. In 2007, Poland used HEU to supply medical isotopes – and continued. Why and how is it that the IAEA and other members states have no problem with Poland possessing HEU? “In 2007, during a supply crisis in the molybdenum 99 market (caused by breakdowns at some of the older reactors, particularly the Canadian NRU reactor), Poland’s MARIA reactor increased its HEU-based production of molybdenum 99 to fill the gap. Though the crisis has passed, the Polish reactor does not appear to have reduced its production. It too uses HEU fuel and targets.

One of the main suppliers of medical isotope is the Netherlands using bomb grade/HEU to process. Obviously not an issue with the IAEA or the U.S. or anyone else. South Africa has maintained around 80 kilograms of its HEU according to NTI [Civilian HEU: South Africa | NTI](#). Clearly, [blessed by America](#) as they are working on producing LEU medical isotopes while the U.S. looks the other way.

It is not clear how anyone can accept so much discrimination in applying science, and to enforce not only lawlessness, but health imperialism.

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