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# Options for Radiological Terrorism

## A Risk-Based Approach

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**Presented to**

**ASTAR**

**April 11, 2012**

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# Basic Concepts

# Radiation and Radioactivity

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- Ionizing Radiation – particles or energy emitted from an atom (in an attempt to reach stability) which are capable of ionizing other atoms.
- Radioactivity (Activity) – rate of decay
  - Curie (Ci):  $3.7 \times 10^{10}$  decays per second
  - Becquerel (Bq): One decay per second
  - Specific Activity: activity per unit mass (Ci/g or Bq/g)
- Radiation dose- exposure of an object (person) to ionizing radiation produces a radiation absorbed dose.

# Options for Radiological Terrorism

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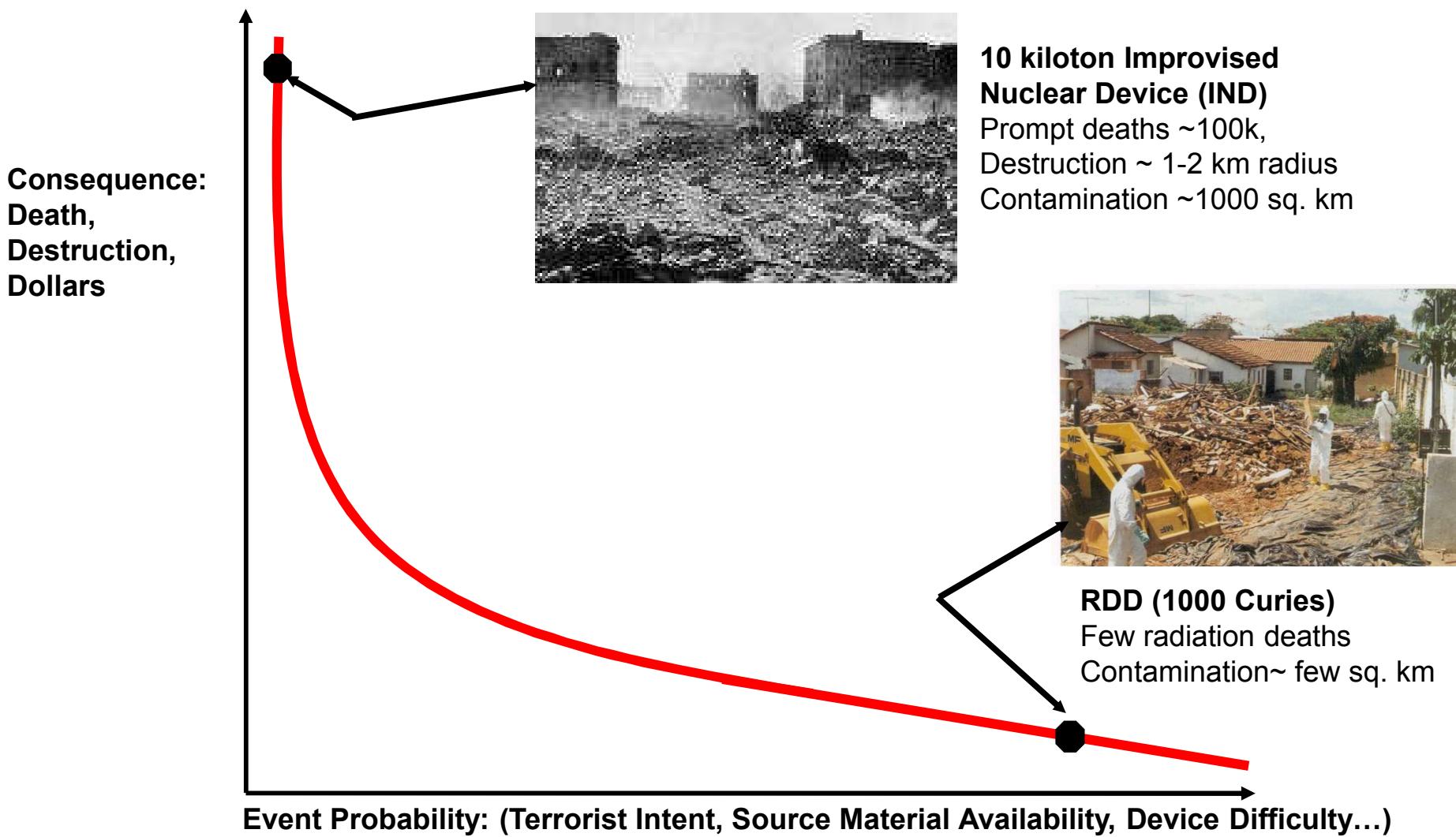
Device Type	Dispersal Form	Economic Effects	Health Effects	Comments
<b>Radiation Exposure Device (RED)</b>	None	Low	Serious deterministic health effects possible (radiation sickness)	Could impact hundreds; No lasting economic impact
<b>Rad-Food Dispersal (RFD)</b>	Dissolve or mix	Medium	Serious deterministic health effects possible (radiation sickness)	Could impact thousands; Other poisons more readily available?
<b>RDD for “Area Denial”</b>	Many	High	Few (if any) deterministic health effects; Latent cancer risk (stochastic) drives population relocation	Could impact tens of thousands; <b>Unique</b> aspect of radiological Material

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# Using Risk to Study Radiological Terrorism

## Risk = Probability x Consequence

# Risk = Probability x Consequences

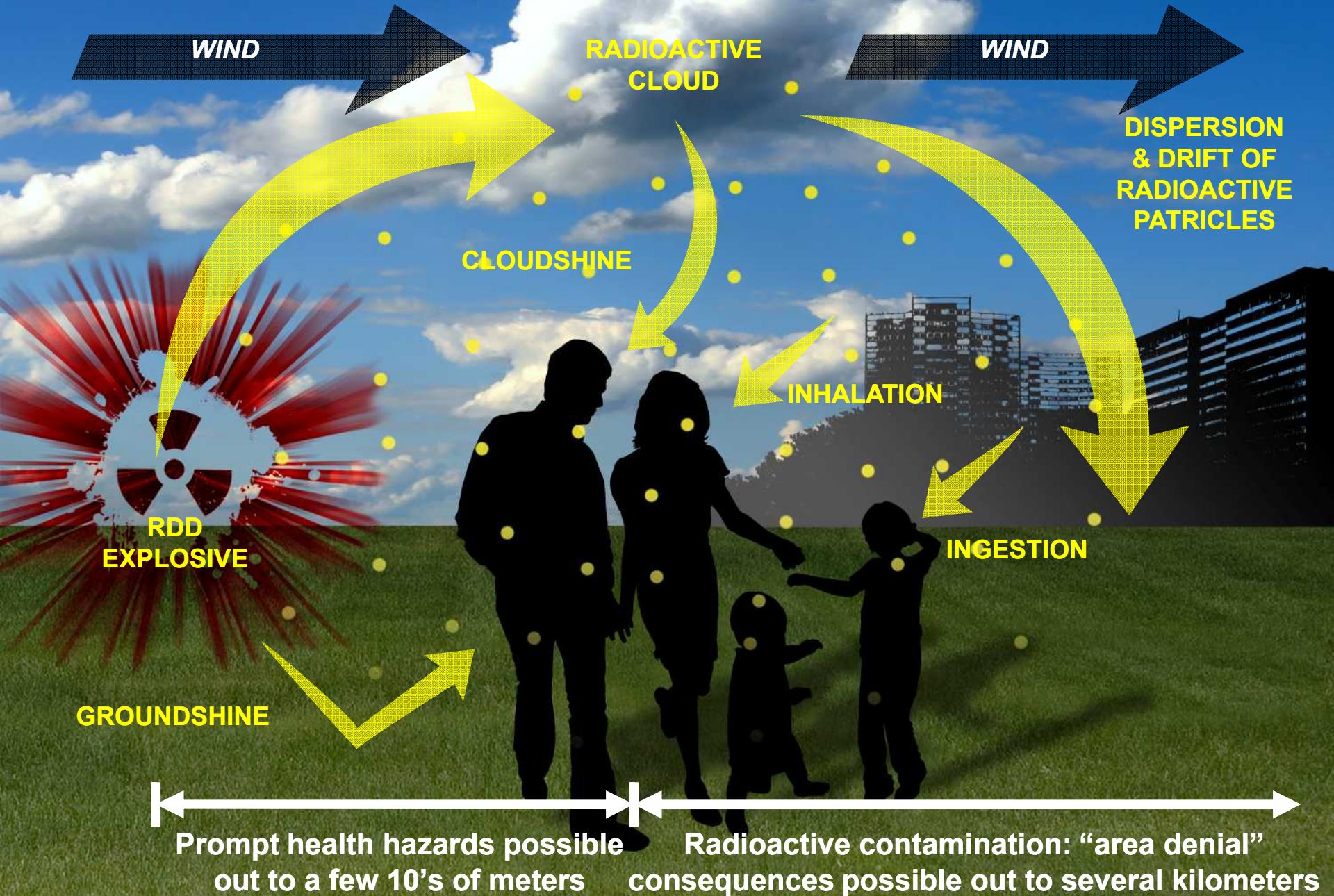


# Public Perception of Risk

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- Public's perception of risk can exceed actual risk
  - Understanding of risk
  - Trust in government information
  - Short-term vs. long-term risk
  - Personal control of risk
  - Benefit/cost of risk
  - Seen vs. hidden risk
  - Equitable sharing of risk

# Explosive Radiation Dispersal Device (RDD)



# Different Methods of Dispersal

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Aerial Release



Explosive Release



Non-Explosive Release

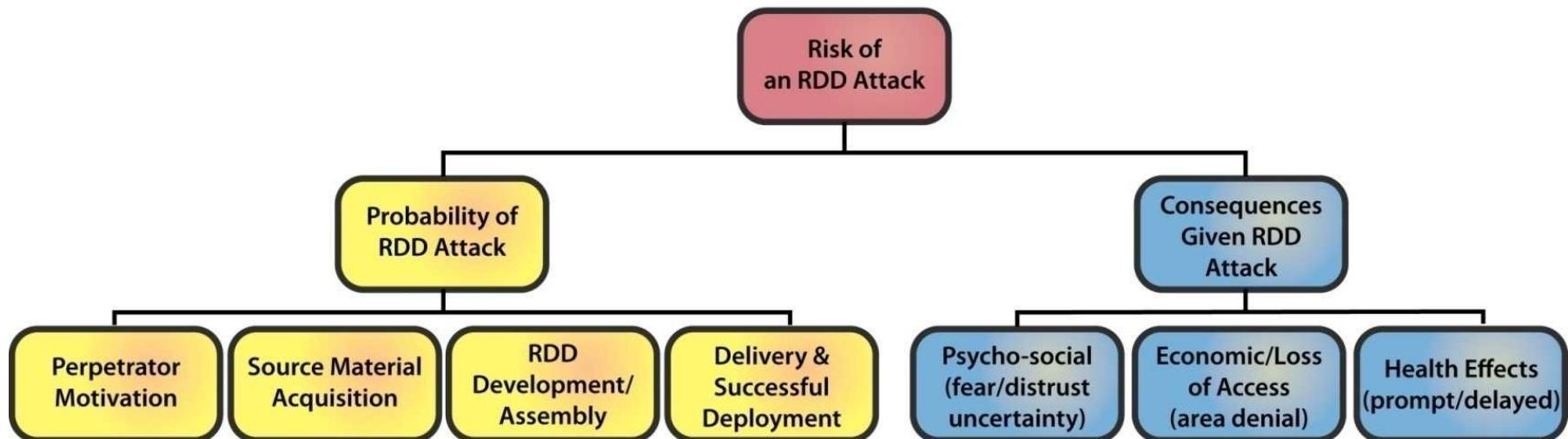


Fire-Driven Release



# RDD Risk Elements

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# Radioactive Materials of Concern: There are Just a Few

# Radionuclide Down-Selection<sup>†</sup>

Step 1. Start with all nuclides (i.e. Chart of the Nuclides)

Step 2. Eliminate all non-radioactive materials.

Step 3. Eliminate all radionuclides with very short or very long half-lives and those that have very low specific activity

Step 4. Eliminate radionuclides that are not commercially available or have no significant dose potential.

Step 5. Consider only those materials that are commercially available in quantities that are sufficient to make a potential RDD

~ 3,700 nuclides

~ 3,000 radionuclides

~ 230 radionuclides

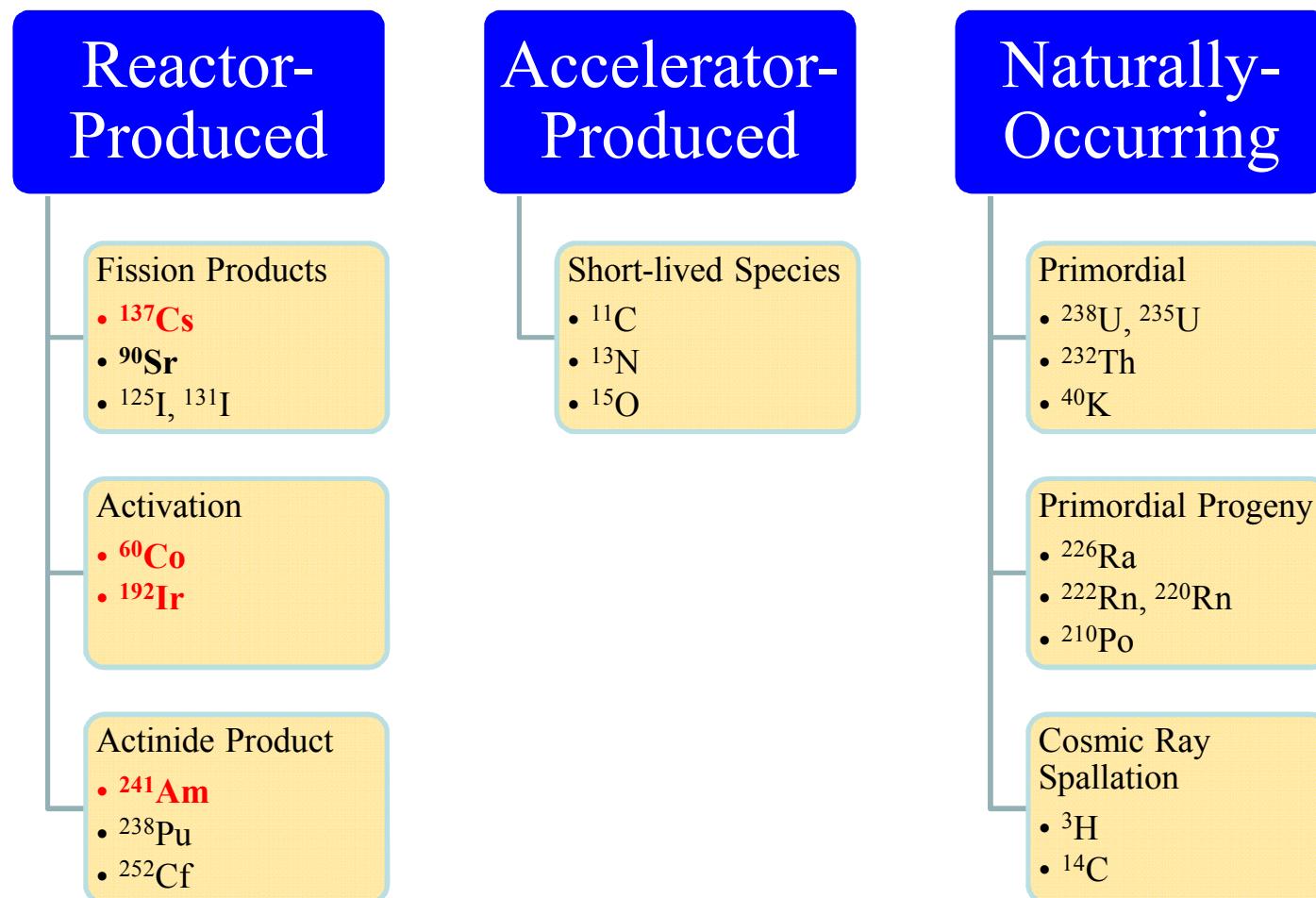
~ 100 radionuclides

~ 10 radionuclides

<sup>†</sup> Derived from W.G. Rhodes III,

# Origins of Radioactive Source Material

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# Radionuclides Properties

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Radionuclide and emission	Half-life	Chemical Form	Specific Activity Ci/g (Approximate)	Area Denial Potential: EPA Relocation PAG Triggered (Approximate)	Typical Use and Ci quantity used
<b>Co-60</b> ( $\beta, \gamma$ )	5.3 yr	Hard Metal	100 Ci per g	10 Ci per sq. km	Irradiators (>1000 Ci)
<b>Cs-137</b> ( $\beta, \gamma$ )	30 yr	Salt powder	20 Ci per g	40 Ci per sq. km	Irradiators (>1000 Ci)
<b>Am-241</b> ( $\alpha, \gamma$ )	430 yr	Oxide Powder	3 Ci per g	40 Ci per sq. km	Well Logging (10 Ci)
<b>Ir-192</b> ( $\beta, \gamma$ )	74 d	Hard Metal	500 Ci per g	100 Ci per sq. km	Radiography (100 Ci)

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How Many Curies are Needed for Area Denial?  
Use EPA Protective Action Guide for Relocation  
(A Stochastic Based Risk Assessment by EPA)

# Large Area Denial RDD: Material Quantity

- Use EPA Protective Action Guideline (PAG) for Relocation
  - Basis: limiting the exposed population equivalent dose to 2 rem in the first year
  - Designed to limit risk of latent cancers to the exposed population
  - For Cs-137, Relocation PAG is triggered at  $\sim 40$  Ci/km<sup>2</sup> ground contamination
- High population density urban area  $\sim 10,000$  inhabitants per sq. km
  - A large section of Manhattan (25 sq. km) would require **1000 Ci**
    - $40 \text{ Ci/km}^2 \times 25 \text{ km}^2 = 1000 \text{ Ci}$
    - ***Potential Relocation of several hundred thousand inhabitants***
    - ***National level event***
- ***Important note: It is difficult to achieve a uniform dispersal***



# Hard Metals

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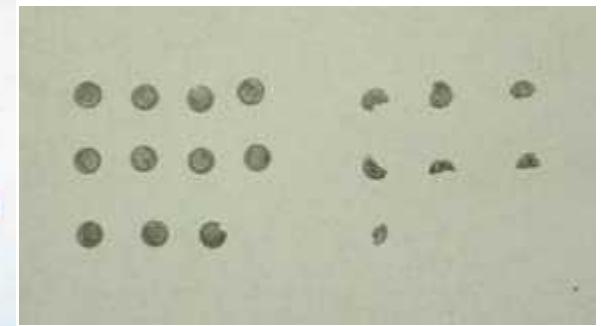
**Co-60 slugs (large irradiators)**



**Co-60 pellets (teletherapy)**



**Ir-192 discs**



**Photos courtesy of Fred Harper and Eric E. Ryder, Sandia Labs**

# Liquids and Powders

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Courtesy of Fred Harper,  
Sandia Labs

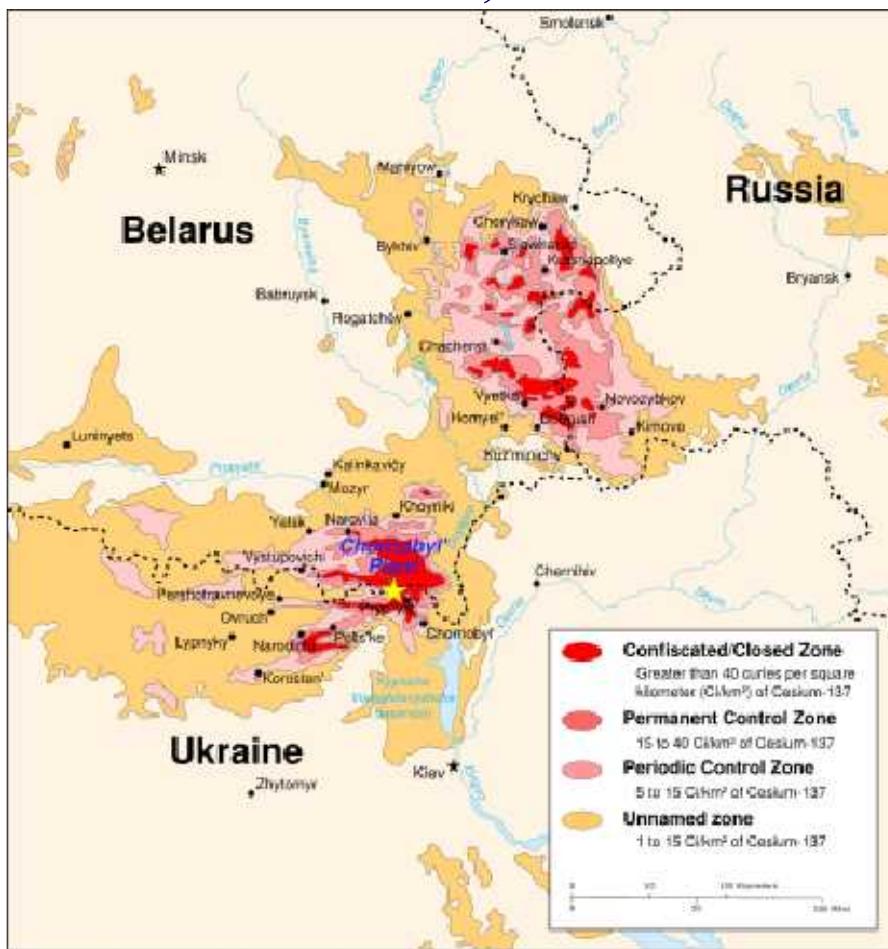


Courtesy of Mike  
Edenburn, Sandia Labs

- Cs-137 physical form: salt (CsCl) pressed powder
- Am-241 physical form: oxide (AmO<sub>2</sub>) pressed powder

# Past Experience with Cs-137

- Chernobyl, USSR April 1986
  - 2 Million Ci, Cs-137



- Goiania, Brazil Sept. 1987
  - 1400 Ci, Cs-137 ( $\text{CsCl}$ )

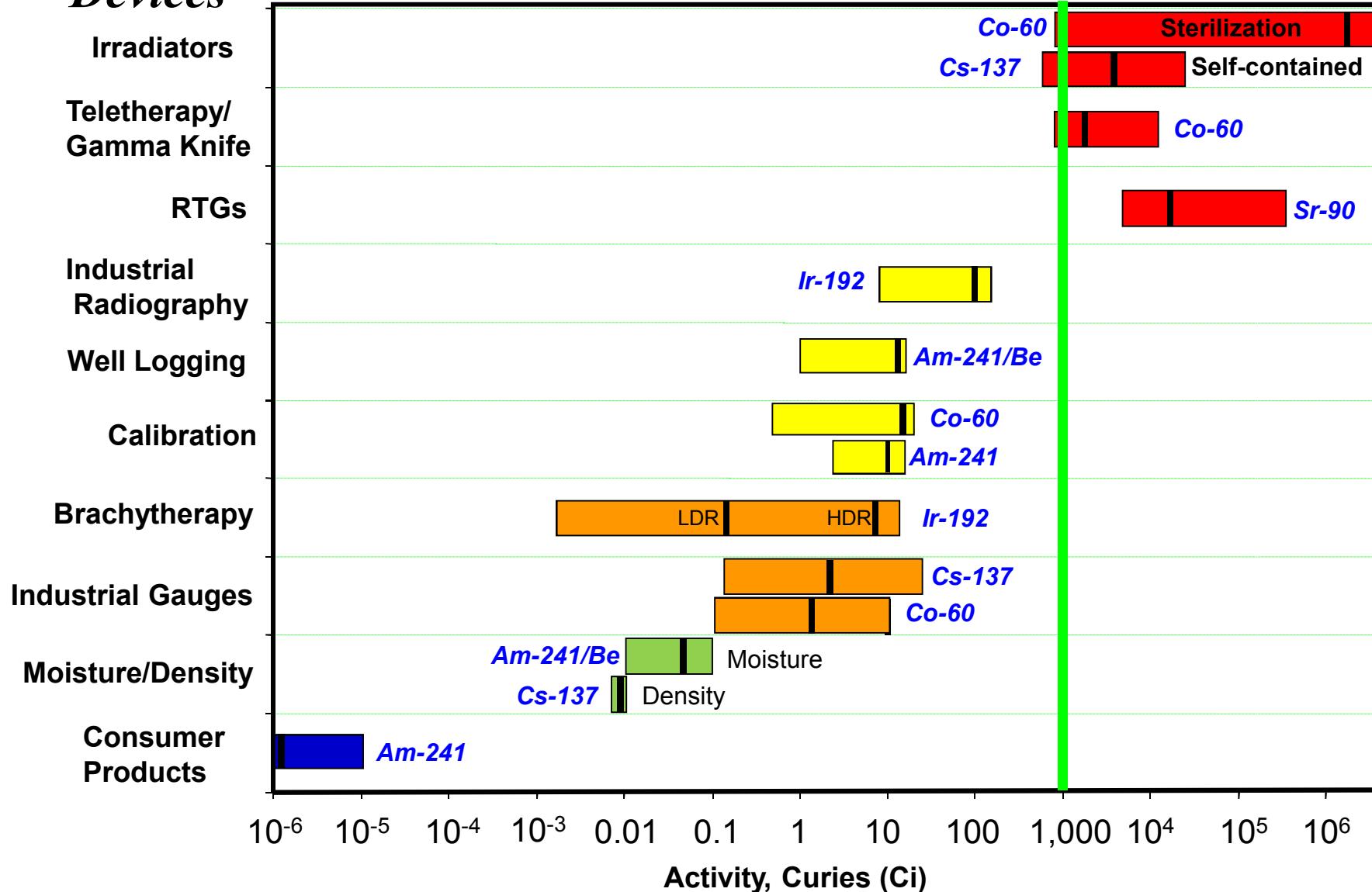


Source: The Radiological Accident in Goiania, IAEA 1988

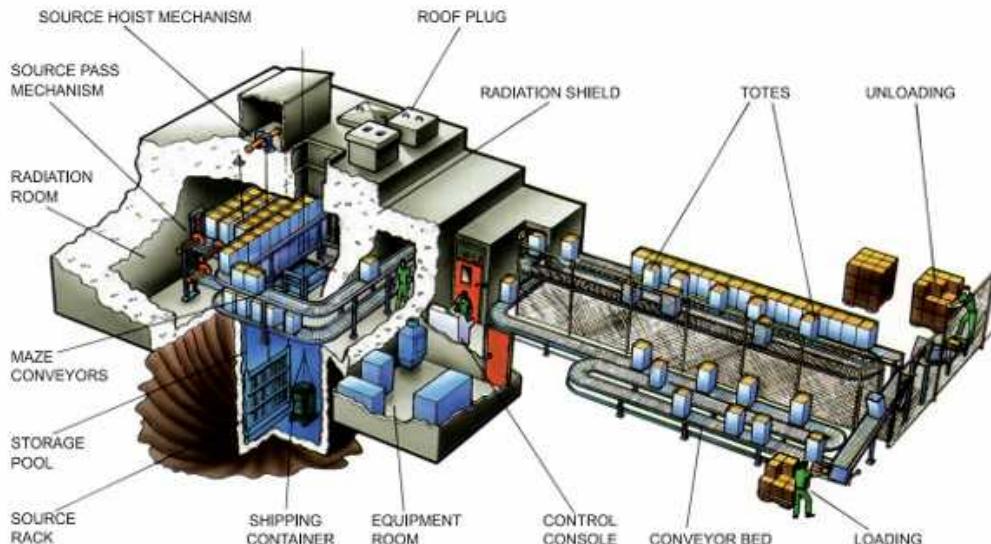
Compare to 1983 Juarez Incident, Co-60

# Radiation Devices & Activity Ranges

## Devices



# Panoramic Irradiators



Panoramic irradiators use Co-60 pencils in a flat panel array containing > 1 MCi



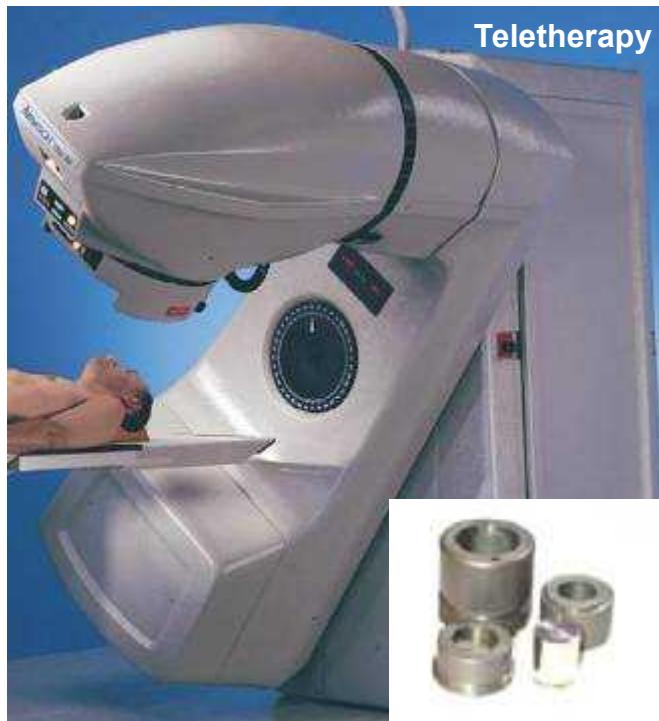
Standard Co-60 pencil and slug



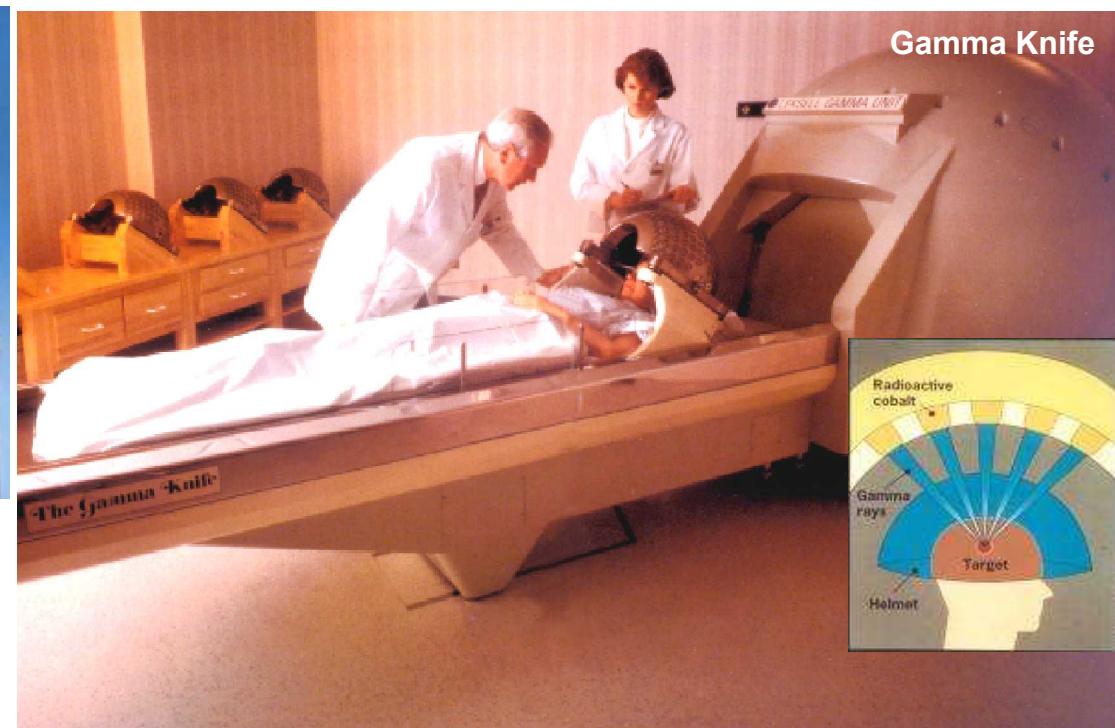
Transport of Co-60 pencils from Canada to the U.S. for use in panoramic irradiators

- 250,000 Curies per shipping cask
- ~100 shipments to US per year

# Teletherapy & Gamma Knife Devices



Teletherapy

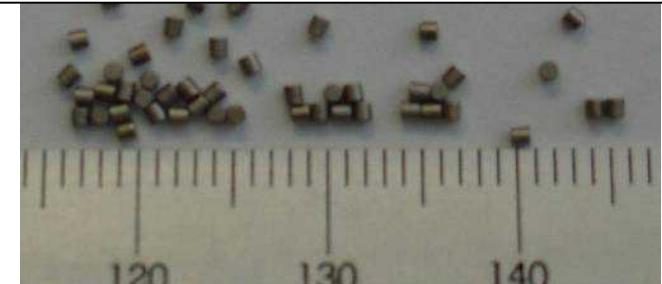


Gamma Knife

Image courtesy of Oak Ridge Associated Universities

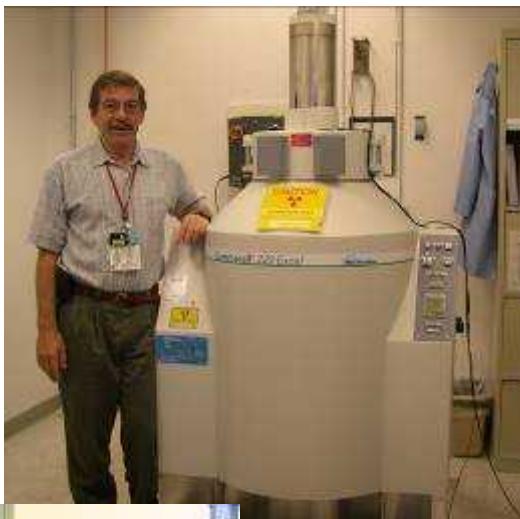
- Used in cancer therapy
- Mostly Co-60, 1000 – 15,000 Curies
  - (some older teletherapy machines use Cs-137).
- Major manufacturers: Elekta, MDS Nordion
  - US inventory ~100 gamma knife, 50 teletherapy
  - A few thousand teletherapy units overseas

Small Co-60 pellets typically found in teletherapy/gamma knife sources  
(minor scale is mm)



# Self-Contained Irradiators

## Research Irradiators

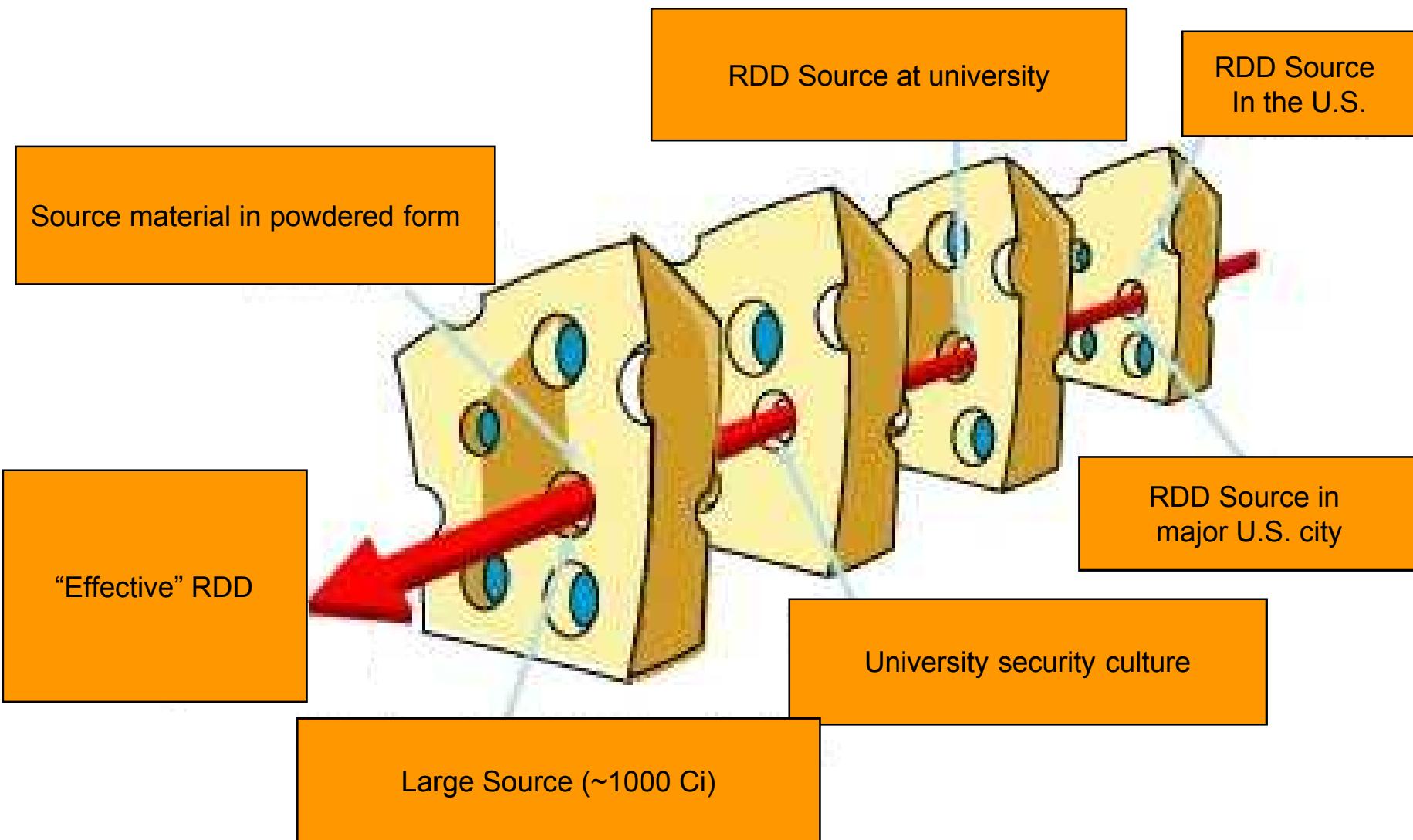


- Used for research and blood irradiation
- Source activity
  - Blood irradiators: 1000 – 10,000 Ci
  - Research irradiators: 1000 – 50,000 Ci
  - ***Most machines use Cs-137 (CsCl)***
  - Some use Co-60
- Found at Hospitals and Universities
- ~ 1000 machines in the U.S.
- ~ 500 additional CsCl irradiators worldwide

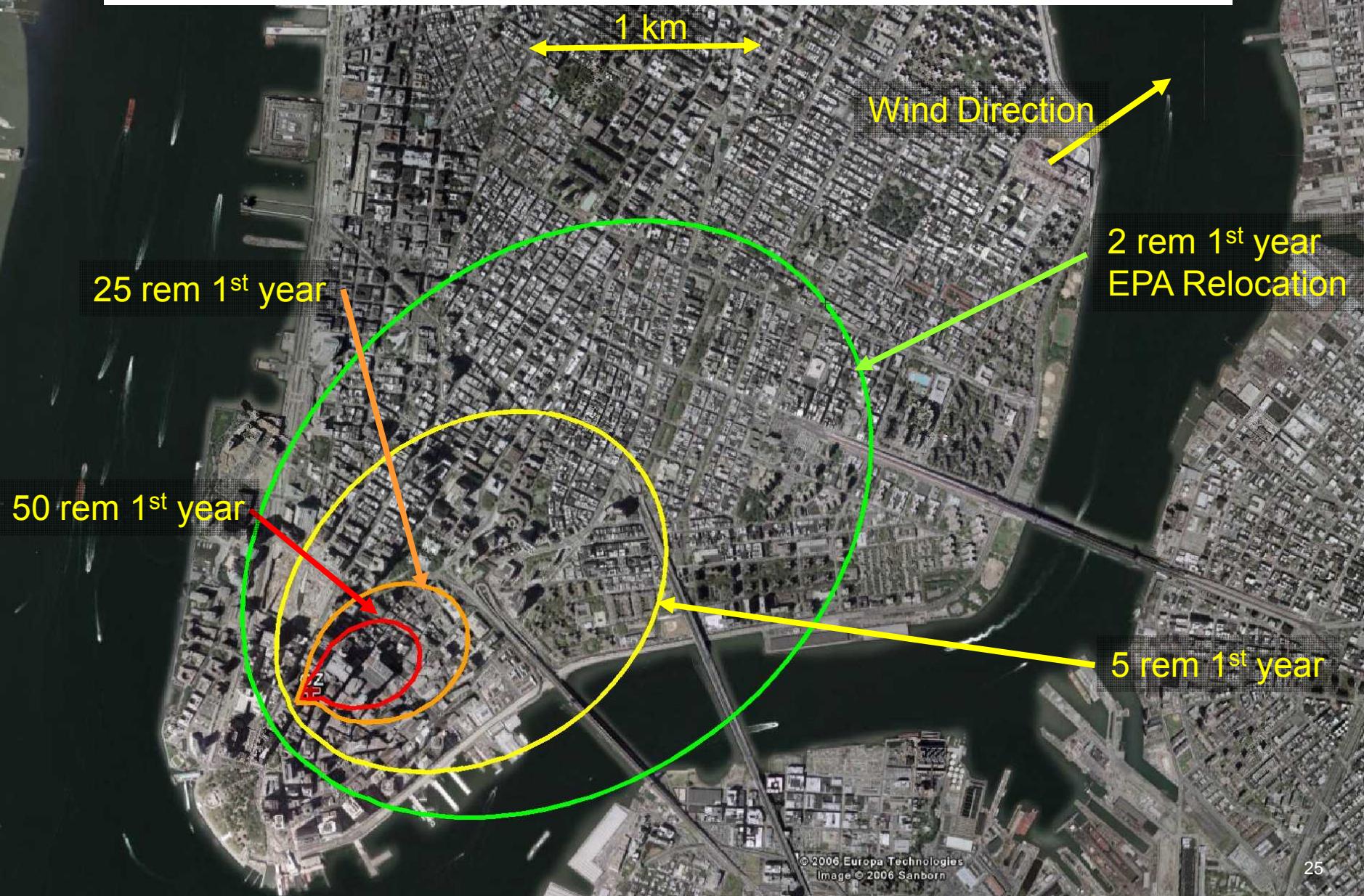
## Blood Irradiators



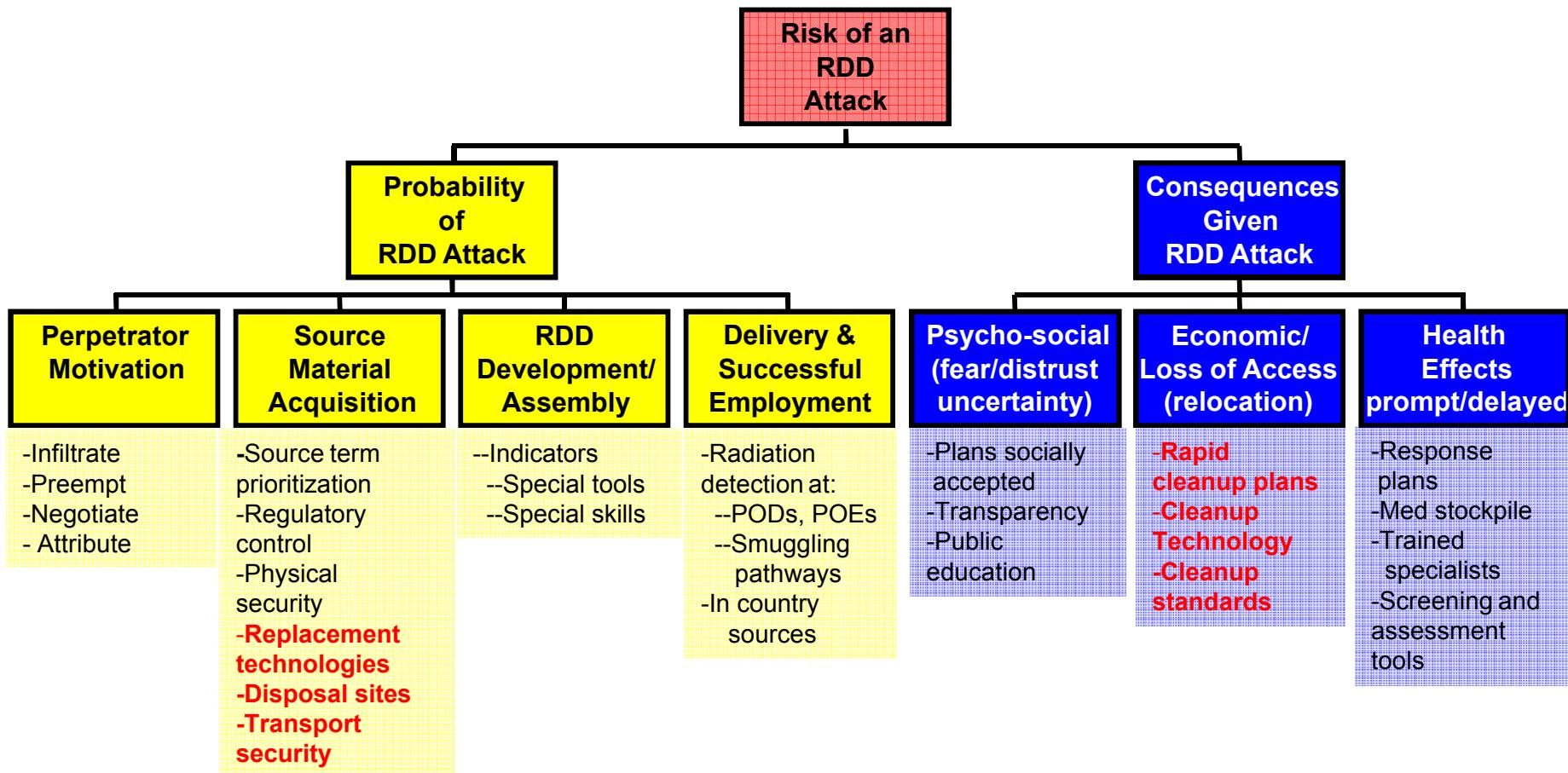
# Loopholes Through the Layered Defense



# Possible Consequence of a Large RDD



# RDD Risk Reduction Countermeasures



- The RDD risks are manageable

# Summary

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- The Risk Based Approach and RDDs
- Area Denial is Based on EPA Relocation PAG
- Radioactive Materials of Concern: Just a Few
- Consequences of an Area Denial RDD Are:
  - Economic Dislocations
  - Psycho-social
  - Few deterministic health effects
- Questions?