

CHERNOBYL

HUMANITARIAN ASSISTANCE AND REHABILITATION PROGRAMME

SITUATION REPORT NO. 01
Emergency Appeal 1994
Programme No. 01.32/94

JULY 4, 1994

1. SUMMARY

Eight years after the Chernobyl Nuclear Power Plant disaster, adults and children are still being affected by radiation in contaminated areas in Russia, Belarus and Ukraine.

The Red Cross Humanitarian Assistance and Rehabilitation Programme concentrates on the screening of the individuals living in these areas still affected by radiation. The programme is carried out by the National Societies of Belarus, Russia and Ukraine with the support of the International Federation of Red Cross/Red Crescent Societies (Federation) and consists of individual medical screening, environmental dosimetric control and food monitoring. Recently the programme has been extended through distribution of water filters and milk powder to children's institutions.

The six Mobile Diagnostic Laboratories of the Red Cross (MDLRC's) work independently in any location. Through measurement of gamma radiation (in the air) and alpha-beta radiation (in the soil) they are able to obtain an accurate picture of the distribution and concentration of contamination as well as to identify particular problem areas.

While the programme has successfully provided for the early diagnosis of oncological diseases and referrals for specialized treatment, it has also been successful in supplying people with information on the prevention of contamination. Prophylactic screening has demonstrated that testing helps to reduce the psychological stress of people affected by Chernobyl by providing them with information about their health status, environment and foodstuffs.



2. BACKGROUND

After the International Workshop on the Red Cross Chernobyl Programme, held in November last year, the Federation renewed its Appeal for the continuation of the Chernobyl programme in 1994. The continuation of the programme has been made possible largely through the contribution of ECU 500,000 by the European Community Humanitarian Office which covers the minimum programme requirements until September-October 1994.

The recommendations from the Workshop to focus on community screening has helped to identify that the main source of radioactive accumulation in people's organs comes from the use of foodstuffs with a high-level of contamination. Consequently, a major thrust is being made to convince people to reduce usage of foodstuffs that are prone to a high level of radioactivity.

One of the main challenges for the MDLRC staff is to maintain the number of people examined per day (50) without diluting the quality of the medical examination. For example, the thyroid gland examination, especially among children, is a full day's activity, with abdominal cavity examination being conducted upon the doctor's recommendation.

Organizational problems related to the implementation of the programme in three different countries, all with newly emerging health administrations and governmental processes, were closely examined at the fifth meeting of the MDLRC staff which was held in Moscow, February, 1994. There, procedures related to the MDLRC work, personnel functions and duties, and the development of standard team activity report forms were further developed.

May 31 - June 3, 1994 the International Workshop for the chairmen of the Regional Red Cross Committees and Heads of the MDLRC was held in Moscow. Organizational questions, financial activity and the creation of the data base for the International Chernobyl Programme were discussed during the workshop sessions.

With the necessary administrative systems in place, emphasis can now be placed on the development of the material and technical aspects of the programme. In the first quarter of 1994, all six mobile diagnostic laboratories were provided with enough fuel for a two year term through a centralized system. Negotiations are continuing to provide for the centralized technical servicing of vehicles and the delivery of spare parts.

Further, the purchase of new medical equipment such as three "Clinitec" urine analyzers, a "QBC" blood analyzer and gauges to examine the abdominal cavity have allowed the MDLRC units to be more efficient and effective in their diagnostic work.

3. RED CROSS ACTION

TABLE I

**TOTAL NUMBER OF TESTS GIVEN BY MDLRC UNITS
January 01 - March 31, 1994**

Mobile unit	Mira 661	Minicont	LB-200	Whole Body Monitor	QBC	Clinitec	Ultra-sound scanner
Gomel	276	327	598	1,842	5,192	5,192	3,916
Mogilyov	496	524	782	3,472	3,354	3,092	2,730
Brynsk	3,464	2,718	3,004	5,853	5,424	2,250	3,372
Kursk	1,329	1,329	1,021	3,297	3,486	2,052	2,354
Zhitomir	964	933	1,106	2,440	2,469	1,796	2,365
Rovno	1,832	1,832	1,386	2,993	3,867	2,151	2,587
TOTAL	8,361	7,663	7,897	22,897	19,112	16,533	17,324

Table I illustrates the number of tests in each category given by the MDLRCs for both the environment (Mira 661 and Minicont) and individual screening (LB-200, Whole Body Monitor, QBC, Clinitec, Ultra-sound scanner), with a resulting total of 99,787 tests completed during the first quarter of 1994.

Tables II and III demonstrate the number of adults and children as well as the number of measurements for foodstuffs and the environment that exceeded acceptable levels of radiation from March 01 - May 31, 1994.

**TABLE II
NUMBER OF INDIVIDUALS TESTED
March 01 - May 31, 1994**

Name of mobile unit	Number of adults tested	Exceeded acceptable levels of radiation	%	Number of children tested	Exceeded acceptable levels of radiation	%
Bryansk	488	56	11,5	2,029	25	1,2
Kursk	2,441	0	0	45	0	0
Zhitomir	698	8	1,14	1,291	24	1,9
Rovno	1,070	50	4,7	2,183	132	6,0
Mogilyov	1,892	4	0,2	341	1	0,3
Gomel	374	0	0	2,105	0	0
TOTAL	6,963	118	1,7	7,994	182	2,3

TABLE III
ENVIRONMENTAL TESTING
March 01 - May 31, 1994

Name of mobile unit	Foodstuff samples	Foodstuff samples that exceeded acceptable levels of radiation	Measurements for gamma radiation (air) Mira 661	Measurements that exceeded acceptable levels of radiation	Measurements for alpha-beta radiation (soil) Minicont	Measurements that exceeded acceptable levels of radiation
Bryansk	390	15	2,493	17	299	0
Kursk	97	0	975	0	973	0
Zhitomir	160	0	619	0	610	0
Rovno	376	39	832	19	832	0
Mogilyov	423	4	254	0	300	0
Gomel	394	0	232	0	374	0
TOTAL	1,840	58	5,469	36	3,388	0

In April - May, the MDLRC's continued to measure the gamma-radiation in the environment and radioactive surface contamination. These measurements proved that the radioactive situation has stabilized in some areas.

However, cases of radioactivity exceeding acceptable levels in cow milk and "gifts of the forest" such as mushrooms and wood berries, have been detected in Zhitomir, Rovno and Mogilyov regions. Consumption of these can result in the irradiation of people's internal organs.

One mobile diagnostic laboratory can screen the health status of up to 60 people daily. From March 01 - May 31 a total of 14,957 adults and children were tested, an average of 4,986 per month. Of this total, 300 or just over 6% exceeded acceptable levels of radiation. It is apparent that eight years later the local population are still being affected by the results of Chernobyl.

Ultrasound technology has enabled close examination of the thyroid gland and in the resulting pathologies, thyroiditis, adenomatous goiter, cancer and cysts have been found. Prior to Chernobyl, cancer of the thyroid gland in children was almost non-existent. But, in this post-Chernobyl era, cancer continues to be discovered. In April-May, two children with thyroid cancer cases were discovered in Mogilyov and Bryansk regions. These children have been referred to the specialized medical establishments for more detailed examination and treatment.

Funding from the European Community allowed a broadening of a programme activities. 100 water filters and 40 mt of milk powder are being distributed in the kindergartens, schools and children hospitals in the most contaminated area.

Thanks to ECHO funding it has been possible to start production and printing of 100,000 booklets with recommendations on the methods of substantially decreasing radio-contamination in foodstuff.

4. CONTRIBUTIONS (ATTACHED)

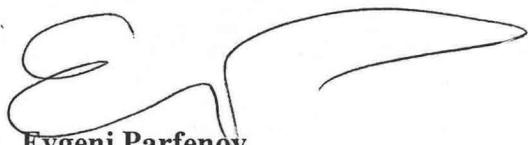
5. CONCLUSIONS

The recent International Workshop held in Moscow, acknowledged that the programme is unique and is of particular importance given the current economic conditions. Further, the mobility of the programme allows the provision of assistance to individuals in remote areas of Russia, Ukraine and Belarus that would otherwise have no access to radiation testing or preventative information.

At this point in time there is no requirement for more intensive modification of the programme now that changes in the statistical, financial and logistical reporting systems have been agreed upon.

However, it was also noted that informational and educational work should also be a component of the MDLRC's everyday activities. It is important to give summarized health and environmental information to the population and it is necessary to stress to the local health care boards the importance of the work of the MDLRC's and the health precautions that the local population must take.

Extending the programme into 1995, as decided at the Workshop in Kiev, will require external funding.



Evgeni Parfenov
Programme Officer
Europe Department



Ilkka Uusitalo
Head
Europe Department

APPEAL No. 01.32/94

CONTRIBUTIONS RECEIVED

27/06/94

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
-------	----------	----------	------	-----------	------	---------

CASH

REQUESTED IN APPEAL		1 341 000				
AUSTRALIA - RC				2 453	23/05/94	
CANADA - RC				145	20/04/94	
EC		500 000	XEU	812 500	02/03/94	
ICELAND - RC		200 000	ISK	3 975	18/02/94	
SUB/TOTAL RECEIVED IN CASH		819 073				

KIND AND SERVICES

GERMANY - RC	REAGENTS	52 800	DEM	45 118	27/06/94	
SUB/TOTAL RECEIVED		45 118				