



BROOKHAVEN NATIONAL LABORATORY
ASSOCIATED UNIVERSITIES, INC.

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Medical Department

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April 8, 1982

Mr. William J. Stanley, Director
U.S. Department of Energy
Pacific Area Support Office
P.O. Box 29939
Honolulu, Hawaii 96820

Dear Mr. Stanley,

The 1982 Marshall Islands medical survey was completed on schedule and seems to have been generally successful. We examined persons in our three principal study groups (Rongelap exposed, Utirik exposed, and the Rongelap comparison group). In addition, we performed examinations for Bikinians living on Majuro atoll and for non-BNL identification card holders 15 years of age and older on Rongelap and Utirik. Sick call was also provided for individuals on those two islands. The actual numbers are given below.

Atoll of Examination

	Kwaj (Ebeye)	Majuro	Utirik	Rongelap	Total
1. Complete exams*					
a. Rongelap - Ailingnae exp.	31	8	-	18	57
b. Utirik exposed	9	33	53	-	95
c. Rongelap unexp.(I.D.)	51	20	-	24	95
d. Bikinians	--	53	1	-	54
e. other unexp.(I.D.)	1	3	2	-	6
f. Unexp. (> 15 yrs)	--	-	118	34	152
2. Sick call	--	-	78	40	118
Total	92	117	252	116	577

*In addition to the above examinations approximately 24 other Marshallese were seen at Ebeye and Majuro as a result of referrals from the Marshall Island Government Hospital System.

With a total of 577 medical evaluations, most of whom required laboratory work, there was considerable pressure on the laboratory to complete an individual's tests at the time of examination. The final tally of tests was:

Complete blood counts, including white cell differentials and platelet counts: 475
Routine urinalyses: 475
Microscopic exams of urine: 61
Stools for ova and parasites: 18
Bacteriologic cultures: 40
Blood chemistries: 68
Sedimentation rates: 15
Serum preparation for Path. Assoc.: 51
Red Cell folate hemolysates: 169
Hb A_{1c} hemolysates: 62
Serum separation for BNL: 475

The success of this considerable effort can be attributed in great part to the renovated lab area on the Liktanur. I wish to express our thanks to Capt. Coberly for the expanded and more efficient and comfortable laboratory arrangements.

Other diagnostic procedures, by the way, included 36 electrocardiograms, 150 pap smears, 250 stool exams for occult blood, and several tissue biopsies and proctoscopies. I mention them to give you some idea of the extent of the medical workup provided on board the Liktanur. I continue to be impressed with how such a small ship can so effectively support the variety of services we provide over a relatively short period of time.

There was one potentially very serious problem on this survey, and, as you are aware, that was the lack of a functioning x-ray machine. It is most fortunate that a situation requiring urgent x-ray diagnosis was not encountered at Rongelap and Utirik. It is certainly possible that a life could have been lost had we met with a patient who had a "surgical" abdomen or extensive trauma. (There could have been important information obtained in either of these events even though the present machine is not a powerful one). I know that the reason for the x-ray malfunction does not lie with your support services. I do hope, however, that the seriousness of the problem can be passed to those individuals who assured us that the machine would be in service. We should, in addition, begin to consider the x-ray unit which will be required for the next trip. Given our fiscal limitations both at PASO and BNL this may be a problem. I did budget for a new machine this past January, but that would be for FY 1983-84. If we are forced into a new x-ray unit at this time we would consider the recommendation of Mr. Kosang Mizutani, the x-ray repair specialist in the Marshall Islands. He recommends a unit they now have at Majuro and apparently in other districts of the Trust Territory. He indicates it functions well (low frequency of repair necessary) and, in addition, they have parts and the expertise to handle repairs that do occur. This unit is manufactured by Shimadzu Seisakusho Ltd., Kyoto, Japan, and is their model MD100P-11PW.

BNL personnel were well pleased with the logistical support of PASO before and during the trip. As in the fall of 1981, several physicians from the State University of New York, Stony Brook accompanied us. I think it is important to continue to exploit the subspecialty expertise found there, as improved patient care results. It is gratifying, therefore, to hear those physicians who went with us this past survey describe their experiences in very positive terms. This makes future recruiting much easier. In a very real way the overall efficient and pleasant day-to-day operation of these surveys, both on Kwajalein (Mr. James Watt) and on the Liktanur (Capt. Keith Coberly) directly contributes to improved patient care. We thank them and the crew of the Liktanur for their continued excellent services. By the way, we appreciated the new bunk lights on the ship. One item that still needs improvement, however, is shelter for the trailer area. I would again comment on the courtesy and understanding extended to our group by Capt. Coberly. No reasonable person could help but note the salutary effect of his extra effort on the successful completion of the surveys.

While I cannot gauge, in depth, the status of the BNL effort in the political and public relations arenas, I would note that Mr. Harry Brown performed two excellent services along these lines that will certainly contribute to greater effectiveness of our mission. One was arranging a meeting with Secretary DeBrum, in which I was able to explain several aspects of our program to him and to Health Minister Jeton Anjain. The second was his clarification of our medical role to a news representative on Majuro which resulted in an up-beat article in the Marshall Islands Journal. Mr. Reynold DeBrum continued to be indispensable to our trips. I greatly appreciate the opportunity to utilize his capabilities as a medical translator. I also feel that we are fortunate to have such an effective intermediary for the town meetings. His calm, deliberate and complete translations surely help us avoid many unnecessary problems and misunderstandings. From my vantage point PASO seems to be most capably represented by Mr. Brown and Mr. DeBrum, and it is a pleasure to work with them. We welcome Mr. Bill Jackson to the Paso team, and it is obvious that he will provide an equivalent fine service.

The next trip is tentatively planned for October-November, 1982. It will be similar, I think, to the pediatric trip of last year, and will again utilize dental facilities in the outer islands. In terms of budgeting it is my plan to utilize interisland air transportation more on future trips. But more details will be sent to you in a few months.

Again, it has been our pleasure to work with PASO on these missions. Thank you very much for your excellent services.

Sincerely yours,

William H. Adams, M.D.

WHA:gc

CC: Dr. R.B. Aronson
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