

FOR THE INDEPENDENCE OF WHO in the field of ionizing radiation



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Press dossier

INDEPENDENTWHO is a citizens based movement composed of individuals and organizations : Brut de Béton, CETIM (Europe Third World Center), ContrAtom Geneva, CRIIRAD (Commission for Independent Research and Information on Radioactivity), Enfants de Tchernobyl Belarus, PSR/ IPPNW (Physicians for Social Responsibility, Switzerland), Réseau Sortir du Nucléaire (French nuclear phase-out campaign), SDN Loire et Vilaine, Peoples Health Movement - PHM, with support from 60 other organizations internationally. Since april 27th 2007, commemoration day of the Chernobyl catastrophe, the movement initiated a non-violent action and public events thought as a long term campaign. **The goal** is to obtain that the World Health Organization (WHO) amends its **may 28 1959 agreement (WHA 12-40)**. In the field of ionizing radiations, this agreement submits WHO to the authority of the International Atomic Energy Agency (IAEA), the global promotor for commercial nuclear energy. The 1959 agreement is the key to understanding the role WHO played after the Chernobyl catastrophe : lies on the number of casualties and millions of inhabitants left to live in highly contaminated regions, without the needed sanitary relief and monitoring.

Since April 26th, 2007, every working day from 8 am to 6 pm, a silent vigil has been staged in front of WHO headquarters in Geneva. Their continued presence demands with insistance that **WHO regains its independence**, in order to see the organization accomplish its mission : « **the attainment by all peoples of the highest possible level of health** »

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- Scientifics judge WHO, IAEA, and ICRP
- From building to exploiting the lie.
- Resistances to the lie.

For an independent : www.independentwho.info

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For an independent World Health Organization

The **World Health Organization** (WHO) is responsible for the health of populations throughout the world and is, in the eyes of the different states, regarded as a leading authority. In accordance with its Constitution, WHO must be independent of any commercial interest. As is shown by the series of cases concerning asbestos and tobacco, to which, today, can be added the issues of pesticides, polychlorobiphenyls or PCBs... the freedom of WHO to carry out its mission can be compromised by the infiltration of lobbies. Such incidents may occur in any institution.

As a result of the WHO/IAEA (International Atomic Energy Agency) agreement, signed on May 28th, 1959, (Res.WHA 12-40), the World Health Organization has contractual ties to an agency whose recognized purpose is the commercial promotion of the atom for domestic purposes. This agreement stipulates: « *whenever either organization proposes to initiate a programme or activity on a subject in which the other organization has or may have a substantial interest, the first party shall consult the other with a view to adjusting the matter by mutual agreement* ». (article I §3). Article III anticipates that it may be « *necessary to apply certain limitations for the safeguarding of confidential information* ». Finally : « *In view of the desirability of maximum co-operation ... the International Atomic Energy Agency and the World Health Organization undertake to avoid undesirable duplication between them with respect to the collection, compilation and publication of statistics* » (Art. 7).

The IAEA reports to the Security Council of UNO and thus is hierarchically dominant to WHO which reports only to the Economic and Social Council¹. What happens **in the case of a conflict of interests, when WHO's mandate to inform and provide health care to the population is confronted with the commercial promotion of nuclear technology by IAEA? The answer can be found in the way the Chernobyl disaster has been managed.**

It took WHO 5 years to make a first appearance on the scene at Chernobyl, thereby leaving a free hand to the IAEA. In November, 1995, WHO called an international conference on the consequences of Chernobyl. Many of the contributions to the conference turned out to be alarming : the acts of this conference remain, as yet, unpublished.² Six months later, the IAEA convened another conference in Vienna (April, 1996), and proclaimed the official toll for the catastrophe - figures which WHO has not challenged : 32 deaths, 200 cases of irradiation, 2000 thyroid cancers in children! These figures, reviewed and upgraded on September 5th, 2005 (approximately 50 deaths, 400 cases of irradiation, 4000 cancers) are just as derisory and completely disregard the state of health of the children in the polluted zones - 8 % of whom are sick - as it does the number of deaths and invalids among the 600.000 - 1.000.000 liquidators who intervened to avoid a greater disaster.

¹ Testimony of Dr Nakajima, Director-General of WHO in 1995, interviewed in Kiev in 2001 (Cf. *Nuclear controversies*, documentary of W.Tchertkoff).

² Cf. *The Chernobyl catastrophe and health* by Michel Fernex <http://independentwho.info>

One has only to compare these figures with those issued on April 25th, 2005, by the Ukrainian Embassy in France and which concern this country alone : « in 1986, 3.5 million inhabitants including 1.3 million children were subject to severe irradiation. In January 2005, there were 2.646.106 recognized victims. Among those who still live in the zones contaminated by radioactive fallout, 84.7 % are sick. In 2004, 94 % of the liquidators were sick; each year the proportion increases».

INDEPENDENTWHO demand that WHO / IAEA agreement should be amended, so that WHO may regain its independence :

- cease to act as an accomplice in the disinformation regarding nuclear technology;
- support the effort of the researchers of the ex-Soviet Union and elsewhere who are endeavouring to provide assistance to the contaminated populations in their struggle against the consequences of the Chernobyl disaster;
- initiate research and preventive treatment concerning the controversial issue of internal radiation by low dose caesium 137 and other radionuclides which remain active for periods ranging from several decades to hundreds of years.

All the research findings should be communicated to the public as nowhere are we free of the risk of an accident for which, so far, we remain totally unprepared.

Our campaigns :

Since April 26th, 2007, volunteers have held a silent vigil in front of the WHO headquarters in Geneva, from 8 am to 6 pm on working days. Their continued presence is staged to denounce the WHO / IAEA agreement so that WHO can find its renewed independence.

Besides **leaflets**, a **petition** that we are currently circulating and public events organised to heighten peoples' awareness of the issue, we collect signatures for an **Appeal from medical professions**, addressed to Health Ministers from every country as well as to WHO Director General.

We urge representatives from Permanent Missions of WHO member States to present a **Resolution** for the upcoming World Health Assembly agenda. This resolution should introduce a revision of the 1959 WHO / IAEA agreement.

INDEPENDENTWHO is a citizen based campaign organised by a collective uniting individuals and organizations : Brut de Béton, CETIM (Europe Third World Center), ContrAtom Geneva, CRIIRAD (Commission for Independent Research and Information on Radioactivity), Enfants de Tchernobyl Belarus, PSR/ IPPNW (Physicians for Social Responsibility, Switzerland), Réseau Sortir du Nucléaire (French nuclear phase-out campaign), SDN Loire et Vilaine, Peoples Health Movement, with support from 60 other organizations internationally. The campaign is not concerned with choices in energy sources. It is aimed exclusively at the World Health Organization, who because of its alliance with IAEA, can not fulfill its own constitutional mission : « to act as the directing and co-ordinating authority on international health work » and « to assist in developing an informed public opinion among all peoples on matters of health ». INDEPENDENTWHO campaigning is intended towards every world citizen who rightly demands that international institutions implement the PRINCIPLES for which they were set up.

For more information : www.independentwho.info
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IPNS- ne pas jeter sur la voie publique-



Geneva, le 22 avril 2009

The Collective Independent WHO

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Open letter to the Director-General of the World Health Organization on the independence of WHO in relation to the health effects of ionising radiation

The objective of the World Health Organization (WHO) as stated in Article 1 of its constitution, is *"the attainment by all peoples of the highest possible level of health."* In order to achieve this objective, Article 2 specifies among the functions of WHO: *"... to act as the directing and co-ordinating authority on international health work",* and *"... to assist in developing an informed public opinion among all peoples on matters of health"*.

This letter is addressed to you by the collective "Independent WHO" in order to remind you of these fundamental obligations. It is written on behalf of all victims of nuclear activities and especially of the Chernobyl accident, notably the "liquidators", the inhabitants of the contaminated zones and the children living, or yet to be born.

As stated in our letter of 24 March 2007 (attached), the Agreement (WHA 12-40 signed on 28 May 1959) between WHO and the IAEA, prohibits the international health authority from undertaking activities prejudicial to the interests of the IAEA. WHO thereby loses its freedom and its authority to control and coordinate matters relating to radiation and health. The terms of this Agreement run counter to the constitutional obligations of WHO.

Early in 1990, WHO was invited by the Soviet Ministry of Health to set up an international aid programme. According to the chronological memorandum issued by Dr Nakajima (Director-General of WHO at the time) during the conference that he convened in Geneva, 20 – 23 November 1995, the international project was undertaken and completed by the IAEA in May 1991. Hence, it was the IAEA, rather than WHO, that provided the information and other aspects of the assistance requested by the Ministry of Health of the USSR.

Furthermore, the proceedings of this conference on the health consequences of Chernobyl were censored. Dr. Nakajima testified to this censorship in a documentary on Swiss-Italian TV in 2001³ imputing it to the legal ties binding WHO and the IAEA. As far as we know, these proceedings remain unpublished.

³ "You must understand that " *the IAEA reports directly to the Security Council of the UN. And we, all specialized agencies, report to the Economic and Social Development Council. The Organisation which reports to the Security Council, - not hierarchically, we are all equal - but for atomic affairs... military use and... peaceful or civil use... they have the authority.*"
.. in "Atomic Lies" by Wladimir Tchertkoff

Since 26 April 2007, our collective has held a non-violent, protest every working day from 8.00 a.m. to 6.00 p.m. to remind WHO of its obligations. At the entrance of the WHO headquarters in Geneva, the protesters hold a silent vigil to demand WHO's independence, so that truth may replace lies in relation to the health consequences of the Chernobyl accident. Together with the IAEA, WHO continues to maintain that the Chernobyl catastrophe has resulted in around 50 deaths and 4000 thyroid cancers. These latest figures date from 5 September 2005⁴. Bearing in mind your high level of responsibility, the denial of all other victims, past, present and future is inadmissible.

Your position is open to criticism, particularly in relation to the recent declarations of recognized authorities within the UN family, to which you belong. During its 54th session, 29 May - 6 June 2006 and in its report on "*Non targeted and delayed effects of exposure to ionizing radiation*" (§C29 to 33), UNSCEAR (United Nations Scientific Committee on the Effects of Atomic Radiation) effectively called into question a "dogma" in the field of radiation protection of living organisms.

On 15 September 2006, the IRSN (Institut de Radioprotection et de Sûreté Nucléaire) produced a summary of the UNSCEAR report which acknowledged that: "*non-targeted effects (effects with various mechanisms) share a common characteristic: they are not related to energy deposit in cell nuclei, which until recent years was the central dogma of traditional radiobiology. Consequently, the carcinogenic effects are somehow tied to mutagenic and clastogenic risks.*" In other words, low doses can be responsible for pathogenic effects.

To what use has WHO put the findings approved by this specialized agency of the United Nations?

Detailed documentation on these questions is to be found in the two books enclosed: « *Le Crime de Tchernobyl* » by Wladimir Tchertkoff, edited by Actes Sud, 2006 and extracts in English of « *Chernobyl: health and environmental consequences of the catastrophe* » by A. Yablokov, V. and A. Nesterenko, New York Academy of Sciences, New York, 2009 (translation and publication of the original Russian text, edited by Naouka, St Petersburg, 2007 is in preparation). The research, bibliographical references, observations, analyses, findings and testimonies in these two books clearly confirm the above-mentioned conclusions of UNSCEAR with regard to low doses.

In the 1930s, whistleblowers warned that chemical substances, and more particularly PCBs (polychlorobiphenyls) might be toxic for human beings. It was only in 1999 that the 3rd Ministerial Conference on Environment and Health, organised by WHO, drew attention to the vulnerability of children to these synthetic compounds. During the conference, WHO pointed to the worrying lack of data relating to the toxicity of chemical substances marketed over the last 50 years. This belated intervention by WHO has allowed the accumulation of a toxic legacy which today we hand down to our children.

The other legacy, radiological in this case, which is in the process of being handed down as a result of the signing of the 1959 agreement, may still be partially redressed provided

⁴ WHO, IAEA, UNDP press release: "*Chernobyl: the true scale of the accident*".

this agreement is revised and WHO regains its independence. The subordination of the international health authority to the international atomic energy agency, in the critically important area of ionizing radiation, is endangering humankind.

"Nuclear negationism", in its denial of the scientific evidence concerning the pathogenic effects of ionising radiation for living organisms (particularly low dose radiation) and its refusal to recognize the extent of harm to population health, of artificial radiation, needs to be brought to public attention.

We wish to inform you of certain legal implications. In lawsuits filed in relation to the asbestos issue, the notion of converging evidence amounting to proof, coupled with the principle of imputability is recognized – notably in the U.S.A. – as is a systematic relationship between certain pathologies and exposure to radioactive material. Nuclear negationism, may be qualified as a "crime of indifference". The notion of "trans-generational crime", more specifically relating to radiation-induced diseases, is also evoked in judicial circles.

It is also becoming apparent from current jurisprudence that even if decision-makers have not acted with the intention to kill or to inflict suffering on others, the mere fact that they have not intervened while being wholly or partly aware of the consequences of their actions and have wilfully failed to inform the victims, provides sufficient grounds for a charge to be brought. Moreover, the precautionary principle obliges you to make decisions relating to major health risks, notably those linked to low dose radiation, even when formal proof is not available.

"Nuclear negationism" can be condemned on several grounds: wilful exposure of others to danger of death, manslaughter and inflicting serious bodily and mental harm to others, failure to act, and non-assistance to persons in danger.

We are aware of the power of the nuclear lobby and the weight of its economic and political influence backed by the leading world authorities. We believe that WHO has become a cog in a system designed to pre-empt any indictment or responsibility in relation to health consequences linked to an accident of nuclear origin. It is a cog however, which is accessory to an intolerable, organised impunity.

As a result of the position adopted by WHO - the world's directing and coordinating authority on health - national and international health policies to address the consequences of the Chernobyl catastrophe are inappropriate, fail to take account of scientific evidence and to properly inform and assist populations. Deterioration of the genetic inheritance of human beings and all living organisms, must be of concern to you as a medical doctor in your allegiance to the Hippocratic Oath.

In this respect, we draw your attention to the fact that in the major lawsuits concerning industrial or governmental negligence affecting the health of the population (Bhopal, contaminated blood, toxic waste etc), it is not just the organization that has been incriminated but also individuals in positions of responsibility.

Dr Chan, children today are born - and will continue to be born - victims of radiation, especially since Chernobyl. Our action forms part of the judgement that future generations will pass on you as Director-General of a World Health Organisation which, in the area of radiation and health, has failed to meet the fundamental obligations set out in its constitution.

For these reasons, we hereby reiterate our demand that the agreement of 28th May 1959 be amended and that the conditions required for WHO to recover full independence, be examined.

We look forward to a reply to our request of 16 February 2009 to meet with you and await your proposal.

Yours faithfully,

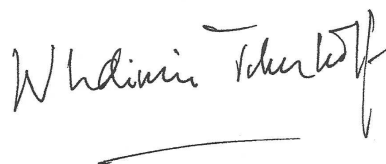
Pr Michel Fernex
PSR/ IPPNW Suisse



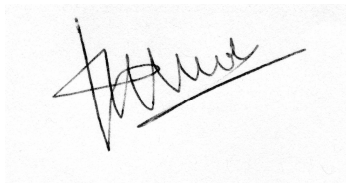
Alison Katz
People's Health Movement



Wladimir Tchertkoff
Enfants de Tchernobyl Belarus



Roland Desbordes
CRIIRAD



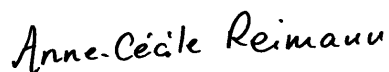
Julie Duchatel
Centre Europe Tiers Monde



Bruno Boussagol
Brut de Béton Production



Anne Cécile Reimann
CONTRATOM Genève



Paul Roullaud
SDN Loire et Vilaine



Charlotte Mijeon
Réseau Sortir du Nucléaire





PETITION For an independent World Health Organization

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As is shown by the series of cases concerning asbestos and tobacco, to which, today, can be added the issues of pesticides, polychlorobiphenyls or PCBs... the freedom of WHO to carry out its mission can be compromised by the infiltration of lobbies. Such incidents may occur in any institution.

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The IAEA reports to the Security Council of UNO and thus is hierarchically dominant to WHO which reports only to the Economic and Social Council⁵. What happens **in the case of a conflict of interests, when** WHO's mandate to inform and provide health care to the population is confronted with the commercial promotion of nuclear technology by IAEA? **The answer can be found in the way the Chernobyl disaster has been managed.**

It took WHO 5 years to make a first appearance on the scene at Chernobyl, thereby leaving a free hand to the IAEA. In November, 1995, WHO called an international conference on the consequences of Chernobyl. Many of the contributions to the conference turned out to be alarming : the acts of this conference remain, as yet, unpublished. ⁶Six months later, the IAEA convened another conference in Vienna (April, 1996), and proclaimed the official toll for the catastrophe - figures which WHO has not challenged : 32 deaths, 200 cases of irradiation, 2000 thyroid cancers in children! These figures, reviewed and upgraded on September 5th, 2005 (approximately 50 deaths, 400 cases of irradiation, 4000 cancers) are just as derisory and completely disregard the state of health of the children in the polluted zones - 8 % of whom are sick - as it does the number of deaths and invalids among the 600.000 -1.000.000 liquidators who intervened to avoid a greater disaster.

⁵ Testimony of Dr Nakajima, Director-General of WHO in 1995, interviewed in Kiev in 2001 (Cf. *Nuclear controversies*, documentary of W.Tchertkoff).

⁶ Cf. *The Chernobyl catastrophe and health* by Michel Fernex <http://independentwho.info>

One has only to compare these figures with those issued on April 25th, 2005, by the Ukrainian Embassy in France and which concern this country alone : « *in 1986, 3.5 million inhabitants including 1.3 million children were subject to severe irradiation. In January 2005, there were 2.646.106 recognized victims. Among those who still live in the zones contaminated by radioactive fallout, 84.7 % are sick. In 2004, 94 % of the liquidators were sick; each year the proportion increases* ».

I demand that WHO / IAEA agreement should be amended, so that WHO may regain its independence :

- cease to act as an accomplice in the disinformation regarding nuclear technology;
- support the effort of the researchers of the ex-Soviet Union and elsewhere who are endeavouring to provide assistance to the contaminated populations in their struggle against the consequences of the Chernobyl disaster;
- initiate research and preventive treatment concerning the controversial issue of internal radiation by low dose caesium 137 and other radionuclides which remain active for periods ranging from several decades to hundreds of years.

All the research findings should be communicated to the public as nowhere are we free of the risk of an accident for which, so far, we remain totally unprepared.

Since April 26th, 2007, on each working day from 8 am till 6 pm, pickets have been posted in front of the WHO H.Q. in Geneva, in order to denounce the OMS- IAEA agreement and demand that WHO regain its independence. I endorse this action so that the WHO may fully carry out its mission.

NAME	FORNAME	ADRESS	OCCUPATION	SIGNATURE

Petition to be returned to:Collectif IndependentWHO (V.Ratel) 32, rue Lt Colonel Boutet F-89 100 SENS
For further details: www.independentwho.info

APPEAL by health professionals for INDEPENDENCE

of the World Health Organisation (WHO)

Initiators :

- **Fran Baum**, Prof. Dept of Public Health, Flinders Univ. Co-Dir. People's Health Movement (Australia)
- **Susanna Beretta-Piccoli**, Pharmacist, Federal Diploma, Federation of Swiss Pharmacist (Switzerland)
- **Rosalie Bertell**, Ph.D, Epidemiologist, Past Pres. Int. Instit. Concern for Public Health, Regent Int. Physicians for Humanitarian Medecine Geneva, International Science Oversight Committee, Ass. of Organic Consumers (USA)
- **Elena.B. Bourlakova**, MD. Prof. Semenov Inst. of Clinical Physics, Acad. of Sciences, Moscow. (Russian Fed.)
- **Christelle Braconnot**, Nurse, French Diploma (France)
- **Marina Carobbio**, MD. Member of Parliament (Switzerland)
- **Blanche Dubois**, Nurse, French Diploma (France)
- **Lena-Marie Glaubitz**, Medical Student (Germany)
- **Liliane Maury Pasquier**, Midwife, Senator (Switzerland)
- **Maria Roth-Bernasconi**, Nurse, Member of Parliament (Switzerland)
- **Youri.I. Bandajevsky**, MD. Prof, ex-Rector, Faculty of Medicine, Gomel (Belarus)
- **Abraham Behar**, MD, Pres. As.Française Médecins Prévention Guerre Nucléaire,Past Pres.IPPNW Europe (France)
- **Chris Busby**, Epidemiologist, Scientific Secretary, European Committee on Radiation Risk, (United Kingdom)
- **Denis Fauconnier**, MD. General Practitioner, Corsica (France)
- **Michel Fernex**, MD, Prof. Emeritus, Faculty of Medicine, Basel, Pres. Enfants Tchernobyl Belarus (France)
- **Pierre Flor-Henry**, MD, Prof, Dir. Psychiatric Services for Adults, Hospital of Alberta (Canada)
- **Claudio Knüesli**, MD, Oncologist, Pres. PSR/ IPPNW Switzerland (Switzerland)
- **Andreas Nidecker**, Prof. Radiology, Faculty of Medicine, Basel (Switzerland)
- **Claudio Schuftan**, MD. Int. Public Health Consultant for WHO, UNICEF, EC. Co-Dir, PHM (Vietnam)
- **Hani Serag**, MD, Public Health Researcher, International Coordinator, People's Health Movement (Egypt)
- **Joël Spiroux**, MD, Environmental Health Expert, Union Rég. médecins libéraux, Hte Normandie (France)

To **Madam CHAN, Director – General, WHO**

and to our Minister of Health _____ Minister of Health of _____ (Country)

The World Health Organization (WHO) works towards the resolution of public health problems. To this end, it is mandated by its Constitution, adopted 7th April 1948, “*to assist in developing an informed public opinion*”. However, since the WHO/IAEA Agreement (WHA12-40) was signed on 28 May 1959, the WHO appears to be subordinate to the International Atomic Energy Agency (IAEA), as regards the risks associated with artificial radioactivity, in particular the study of the health consequences of the explosion at Chernobyl.

In the past, WHO was paralysed in its campaign against passive smoking because of the pressure exerted by the tobacco lobby. In the same way, WHO is paralysed by its links to the IAEA, an institution that ranks highest in the UN hierarchy. This agency reports to the UN Security Council where it coordinates the promotion of commercial nuclear energy. The other UN agencies and the WHO report only to the UN Economic and Social Council.

The principal statutory objective of the IAEA is to accelerate and enlarge “*the contribution of atomic energy to peace, health and prosperity throughout the world*”. However, the 1959 Agreement ignores the conflict of interests which results from this. It stipulates that “*Whenever either organization proposes to initiate a programme or activity on a subject in which the other organization has or may have a substantial interest, the first party shall consult the other with a view to adjusting the matter by mutual agreement*”. The Agreement also provides (Article III) for the application of “*certain limitations for the safeguarding of confidential information*”. This confidentiality led to the non-publication of proceedings of the WHO Conference in Geneva on “The health consequences of Chernobyl and other radiological accidents” (20-23.11.95.). The 700 participants still await the Proceedings which were promised for March 1996. Dr Nakajima, who was Director General of WHO at the time of the conference, confirmed in 2001, in an interview with Swiss Italian Television, that censorship of these proceedings was due to the legally defined relations between the WHO and the IAEA.¹

¹ Cf. “Nuclear Controversies”, a documentary film by W. Tchertkoff www.alerte-verte.com

As regards research projects, “adjusting the matter by mutual agreement” implies removing all freedom from WHO in the area of nuclear accidents. Thus, following the accident at Chernobyl, we read, “*Beginning of 1990: WHO was invited by the Minister of Health of the Soviet Union to set up an international aid project. May 1991. Completion of the International Project by the IAEA*”.

Thus it was the IAEA, rather than WHO, that provided the plans for a project requested by the Minister of Health of the USSR. This explains why genetic damage, known to be a critical measure since the publication in 1957 of a WHO report entitled, “Genetic Effects of Radiation on Humans”, was omitted, while caries and dental health were accorded a higher priority by the IAEA.²

As a result, it is the promoters of nuclear energy, the IAEA, with the agreement of UNSCEAR³ and the ICRP (International Commission on Radiological Protection), who provide information to the United Nations on the health problems of Chernobyl. In 1996, they cited 32 deaths from radiation; in 2005, they conceded about 50 deaths and 4000 thyroid cancers in children,⁴ whilst taking no account of the death and morbidity rate among the 600,000 to 800,000 “liquidators” that took part in the clean-up operation at Chernobyl.

It is urgent that WHO provide assistance to the one million children condemned to live in an environment contaminated by radionuclides from Chernobyl. Up to 90% of the contamination is internal, and the rest external. Some internal organs accumulate concentrations of radionuclides. The resulting chronic irradiation has damaging effects on health. In Belarus today, 85% of the children in contaminated areas are ill; before the explosion, this figure was 15%.⁵ In 2001, the Chief Medical Officer of the Russian Federation stated that out of 184,175 registered liquidators, 50,000 were ill and 15,000 had already died. The Ukraine provided 260,000 liquidators. According to a press release from the Ukrainian Embassy in Paris, dated 25 April 2005, 94.2% of them were ill in 2004. At the Kiev conference in 2001, we learned that 10% of these workers, half of whom were young military recruits, had died, and one third was seriously ill. The Ukrainian Embassy stated that 87.85% of the inhabitants of the contaminated territories were ill. That proportion increases every year.

Hundreds of epidemiological studies, in Ukraine, Belarus, and the Russian Federation⁶, have established that there has been a significant rise in all types of cancer causing thousands of deaths, an increase in infant and perinatal mortality, a large number of spontaneous abortions, a growing number of deformities and genetic anomalies, disruption and retardation of mental development, neuropsychological illness, blindness, and diseases of the respiratory, cardiovascular, gastrointestinal, urogenital and endocrine systems.

We, as health professionals, join with those who have denounced this unacceptable situation for more than ten years now. With them, we demand revision of the Agreement (WHA 12-40) in order to restore independence to WHO in accordance with its constitution.

We are asking our Minister of Health to place on the agenda of the next World Health Assembly the revision of the agreement between the IAEA and WHO, so that WHO can once again take up its role and “*act as the directing and coordinating authority on international health work*”, “*promote and conduct research*”, and “*provide information, counsel and assistance in the field of health*”⁷ which includes the area of ionising radiation.

Name	Firstname	Profession	Adress	Signature
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Please send your signed letter to the following adress: « **Indépendence for WHO** » - Philippe de Rougemont, 71 rue Liotard 1203 Geneva – Switzerland.

More information : www.independentwho.info

² WHO, Health Consequences of the Chernobyl catastrophe: http://whqlibdoc.who.int/publications/1995/9242561819_fre.pdf (in French)

³United Nation Scientific Committee for the Study of the Effects of Ionizing Radiation

⁴ Press Release by IAEA, WHO, UNDP, 5th September 2005: “Chernobyl: the scale of the accident”.

⁵ Figures given by the Minister of Health and the Academy of Sciences of Belarus, during parliamentary hearings in April 2000.

⁶ It is surprising that Report 2 of the United Nations Forum does not take into consideration the many publications by Ukrainian, Russian and Belarusian researchers concerning the increase in non-cancerous illness in children living in the contaminated areas of Chernobyl.” Stepanovna and Coll in <http://www.ehjournal.net/content/7/1/21>

⁷Articles 2 a, n and q of WHO Constitution



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A « revision » to the 1959 WHO-IAEA agreement has to be asked for by at least 2 member states with the support from NGOs. It is to this effect that the collectiv "Independent WHO" proposes this **Resolution** to different member states along with a new aim and new devices meant to ensure public health and research, both in the the field of ionising radiation.

Resolution

Health care for populations affected by the Chernobyl catastrophe and establishment of an independent WHO Commission on Radiation and Health

Recalling that the worst industrial accident in history occurred twenty two years ago in Chernobyl, Ukraine, with radioactive fallout contaminating large parts of the Northern hemisphere and affecting most seriously the Russian Federation, Ukraine and Belarus.

Recognizing that full information on the health consequences of industrial activities including those of the nuclear industry, is required for the protection of human health and the prevention of avoidable disease and premature death.

Acknowledging that such information must be complete, up to date, unbiased and based upon studies undertaken by independent academic and research institutions.

Concerned that the WHO may have been constrained in fulfilling its constitutional mandate in relation to the health consequences of the Chernobyl catastrophe by the 1959 Agreement with the International Atomic Energy Agency (IAEA).

Recognizing that the WHO/IAEA agreement in practice subordinates WHO to decisions taken by the IAEA whose statutes specify that its main goal is “to accelerate and enlarge the contribution of atomic energy to peace, health and prosperity throughout the world”.

Concerned that populations in the most affected areas have not received adequate attention in terms of health care, material and social support and protection from continuing radioactive contamination.

Noting the multiple, serious health problems of populations in the most contaminated areas with two groups in particular requiring urgent assistance:

- (1) the 600,000 -1 million “liquidators” sent to extinguish the fire and construct the sarcophagus, a large proportion of whom have died or are seriously ill, *and*,
- (2) the children, whose developing immune, digestive and nervous systems and internal organs are acutely vulnerable to radiocontamination.

REQUESTS the WHO

1. To take immediate action, in collaboration with appropriate partners including the Office for the Coordination of Humanitarian Affairs, to ensure that medical care, treatment and adequate radioprotection are provided to populations in the affected areas.
2. As a priority, to coordinate with appropriate partners, the importation of uncontaminated food to meet all nutritional needs of the populations living in the affected areas and the implementation of interventions (such as daily administration of apple pectin) known to facilitate elimination of radioactive isotopes and significantly reduce radioactive doses delivered to sensitive cells/organs.
3. To establish a Commission on Radiation and Health made up of independent experts with no connections, financial or otherwise, to industry or industry associations, to review available evidence on the health consequences of the Chernobyl accident, including all studies undertaken by independent researchers, and to report their findings to the World Health Assembly in May 2010.
4. Within the Commission, to establish working groups to examine and report on evidence available and gaps in research in relation to different aspects of radiation and health, and as a priority, a working group on the health consequences of chronic, low dose, internal radiation and a working group on damage to the human genome from both internal and external sources.
5. To publish and make available in full, the proceedings of the Geneva 1995 and Kiev 2001 international consultations on the health consequences of Chernobyl.
6. To review the 1959 agreement between the WHO and the IAEA and to propose amendments which will ensure that WHO may fulfil its constitutional mandate in the area of radiation and health as follows: “to act as the directing and coordinating authority on international health work”, “to promote and conduct research in the field of health” and “to provide information, counsel and assistance in the field of health” (Article 2a, n and q).

URGES Member States

1. To commission independent research to investigate radiocontamination, including that resulting from the Chernobyl accident, in their national territories and the health consequences for their populations; and to report their findings to the newly established WHO Commission on Radiation and Health.



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HUMAN RIGHT COUNCIL
Seventh session
Agenda item 3

PROMOTION AND PROTECTION OF ALL HUMAN RIGHTS, CIVIL, POLITICAL, ECONOMIC, SOCIAL AND CULTURAL RIGHTS, INCLUDING THE RIGHT TO DEVELOPMENT

Joint written statement* submitted by Europe-Third World Centre, a non-governmental organization in general consultative status, France Libertés : Fondation Danielle Mitterrand, an non-gouvernemental organization in special consultative status, and Mouvement contre le Racisme et pour l'Amité entre es Peuples (MRAP), a non-governmental organization on the Roster

The Secretary-General has received the following written statement which is circulated in accordance with Economic and Social Council resolution 1996/31.

[20 February 2008]

* This written statement is issued, unedited, in the language(s) received from the submitting non-governmental organization(s)

Violation of the Right to Food and the Right to Health of populations affected by the Chernobyl catastrophe in Ukraine, the Russian Federation and Belarus

Summary of the problem

Since the Chernobyl catastrophe, between 5-8 million people¹ in Belarus, the Ukraine and the Russian Federation continue to live in areas that remain heavily contaminated. Up to 90% of the radiation dose received by the affected populations is internal due to incorporation of artificial radionuclides from contaminated food.

The radiation dose in the contaminated regions of Chernobyl is both external and internal. The health consequences of this chronic irradiation have been systematically underestimated or ignored by national and international authorities for 22 years now.

The main source of disinformation on the health consequences of Chernobyl is the International Atomic Energy Agency (IAEA). The mandate of the IAEA is to promote use of the atom². It is an industrial lobby with no public health mandate or competence. The 1959 Agreement between WHO and the IAEA³ prevents WHO from fulfilling its constitutional mandate as “international directing and coordinating authority on international health issues” in the critically important area of radiation and health.

The *permanent* conflict of interest is clear as the industry is both judge and jury in relation to the safety of its own activities. WHO's independence in the area of radiation and health must be established.

As a result of the underestimation and denial of the health consequences, adequate health care and protection have not been provided and preventive and protective measures to reduce exposure and mitigate the effects of exposure have not been taken or have been prematurely interrupted for economic or political reasons. The rights of affected populations in Ukraine, the Russian Federation and Belarus to safe and nutritious food and to health and health care thus, have been and continue to be, violated.

The Chernobyl accident on 26 April 1986

The explosion, followed by the fire which lasted 10 days, released at least 2 billion curies of radioactive substances, which were dispersed globally (between 100 and 200 times the amount released by the bombs on Hiroshima and Nagasaki together). The pattern of contamination in soil was highly irregular depending upon wind direction and rainfall in the days and weeks following the explosion. The most contaminated area (260,000 kilometres²) will return to normal levels of radioactivity (for isotopes of uranium and plutonium) in about 100,000 years. Scores of radioactive isotopes were released, the most dangerous being strontium 90, cesium 137, iodine 131, plutonium 239 and uranium 235. These persist today in soil, water and forests, are taken up in the food chain and accumulate in the organism.

¹Greenpeace. *The Chernobyl catastrophe: consequences on human health*. Amsterdam, April 2006.

²IAEA. www.iaea.org/About/statute.html

³WHO. *Agreements with other International Organizations* www.int/gb/bd/PDF/6846/e-bd46-p4.pdf

Almost all of Europe was contaminated – dangerously so 50% of 13 countries and 30% of 8 countries. The three most affected countries (of the former USSR) were Ukraine, the Russian Federation and Belarus.

Radioactive contamination after 22 years

Rural populations of the three most affected countries have had no choice but to consume contaminated food for 22 years. As a result, radionuclides have accumulated in their organisms, sometimes in considerable concentrations.

Worst affected are poor, rural populations consuming local produce - milk, cheese and meat from local livestock, vegetables grown locally, berries, mushrooms and game from the forests and fish from ponds and rivers. The use of highly contaminated ash as fertilizer further contributes to high concentrations of radionuclides in food.

The International Commission on Radiation Protection (ICRP) recommends 1 mSv as the dose limit for the reference group (the worst affected individuals in a given population). This limit is exceeded in hundreds of villages in the affected countries, representing hundreds of thousands of people, by the external dose alone or by the combination of external and internal doses.

The health of affected populations

Internal organs accumulate high concentrations of radionuclides, notably the heart, placenta and the endocrine, immune and central nervous systems. The resulting chronic contamination has very serious effects on health. With their developing organ systems, children are acutely vulnerable to ionising radiation. The other groups most severely affected are the liquidators, the evacuees from the most dangerously contaminated areas, and the residents of the less (but still dangerously) contaminated areas, depending on their eating habits.

In Belarus today, 85% of the children in contaminated areas are ill; before the explosion, this figure was 15%⁴ The Chief Medical Officer of the Russian Federation noted in 2001 that 10% of 184,175 liquidators (half of whom were young military recruits) had died, one third was invalid and the situation was deteriorating rapidly. According to a press release from the Ukrainian Embassy in Paris, dated 25 April 2005, 94.2% of their 260,000 liquidators were ill in 2004. It was also noted that 87.85% of the inhabitants of the contaminated territory were ill and that proportion increases every year.

Hundreds of epidemiological studies in Ukraine, Belarus and the Russian Federation, have established that there has been a significant rise in all types of cancer causing thousands of deaths, an increase in infant and perinatal mortality, a large number of spontaneous abortions, a growing number of deformities and genetic anomalies, disturbance and retardation of mental development, neuropsychological illness, blindness and diseases of the respiratory, cardiovascular, gastrointestinal, urogenital and endocrine systems⁵.

⁴Figures provided by Minister of Health & Academy of Sciences, Belarus, parliamentary hearings, April 2000.

⁵Alex Rosen. *Effects of the Chernobyl catastrophe: a literature review*. January 2006.

www.ippnw.org/ResourcesLibrary/Chernobyl20rosen.pdf.

The source of the disinformation

Evidence of adverse health consequences of nuclear activities, civil or military, represents a serious threat to the nuclear establishment, which includes the military industrial complex of the powerful nations. All such evidence, especially from independent researchers, has been covered up, denied and denigrated since around 1945⁶. The cover up is particularly successful because the commercial and military nuclear lobby is represented at the highest level in the UN system through the IAEA which reports to the Security Council, itself composed of the most powerful nuclear states. Dr Hiroshi Nakajima, former Director-General, WHO, stated in a documentary shown on Swiss television that the non-publication (or censorship) of the Proceedings of the International Conference on the health consequences of Chernobyl, held in Geneva in 1995, was due to the legal agreement binding WHO to the IAEA⁷

National authorities, supposedly serving the public interest in terms of radioprotection, are likewise subservient to, and inseparable from, national nuclear establishments. Regrettably today, we cannot always count on academic and research institutions to undertake independent studies⁸. Public finance for independent investigation in any scientific domain is limited and in the area of radiation and health, much of the so-called “peer reviewed literature” emanates from, or is financed and then filtered by, the nuclear establishment.

There is, however, a large body of evidence from independent researchers and institutes in the three countries, available only in Russian and ignored by the international medical community⁹

Flaws in the science and research of the nuclear establishment

As a general point, since the 1950s, health professionals have been largely excluded from the organizations responsible for health assessment and protection policies in matters of radiation. These matters are decided by the nuclear establishment made up of the ICRP, IAEA and UNSCEAR at the international level, and agencies such as NCRP (UK), BEIR (USA) and EURATOM (EU), at national levels¹⁰. These entities are closely interlinked, with overlapping and *often closed* membership¹¹.

Specifically, the health effects of chronic, low level, irradiation of certain organs which accumulate radionuclides have been denied and inappropriate models based on a one-time, external, high level radiation events (as in Hiroshima) have been applied. It is increasingly recognized by national and international authorities that there is no safe, risk-free, dose of

⁶Permanent People's Tribunal, International Medical Commission on Chernobyl. *Chernobyl: environmental, health and human rights*. Vienna, 12-15 April, 1996.

⁷Wladimir Tchertkoff. *Nuclear Controversies*. Documentary. Feldat films, 2004. Downloadable from www.independentwho.info

⁸Lancet. 2001 Apr 14;357(9263):1141. *The tightening grip of big pharma*. (Editorial)

⁹Greenpeace. *The Chernobyl catastrophe: consequences on human health*. Cited above.

¹⁰International Commission on Radiological Protection (ICRP), International Atomic Energy Agency (IAEA), United Nations Scientific Committee on the Effects of Atomic Radiation (UNSCEAR), Biological Effects of Ionizing Radiation (BEIR), National Council on Radiation Protection (NCRP), European Community of Atomic Energy (EURATOM).

¹¹Permanent People's Tribunal, International Medical Commission on Chernobyl. *Chernobyl: environmental, health and human rights*. Cited above.

ionising radiation⁷ and that the model upon which the ICRP bases its recommendations for radioprotection is irrelevant to internal, low dose exposure.⁸

The science that has informed the nuclear debate in general and Chernobyl in particular is corporate science and the flaws in this pseudoscience range from the flagrant and preposterous to the subtle and dishonest.

The first category includes falsification and suppression of data, failure to undertake regular whole body measurements and to correlate this with development of cancer or any other health problems, attacks on independent researchers and their institutions, censorship of studies revealing adverse effects, discounting thousands of un-translated studies from the three most affected countries and exclusion from conference agendas of entire scientific domains (such as the health effects of chronic, low dose, internal radiation, accounting for most of the contamination in populations around Chernobyl).

The second category includes averaging exposures over entire populations and ignoring local sources of concentrated contamination, ending studies after 10 years thereby excluding long latency problems (10-30 years) as well as long term morbidity and mortality, qualifying five year survival as “cure”, only considering cancer, only considering those still alive, only considering the three most affected countries, claiming decreases in childhood cancers when in fact, children have become adults with cancer and therefore no longer appear in that database, and dozens of other shameful manipulations of data⁹.

Discrepancies in estimates of morbidity and mortality can no longer be ignored

The official evaluation of the health problems (morbidity and mortality) in the regions affected by Chernobyl differs from that of various independent researchers by a factor of 100, sometimes even 1000. To cite one example, at least 600,000 liquidators participated in the clean-up and were subjected, often without protection, to horrifying levels of radiation and to minute dust particles rich in uranium isotopes. Yet WHO in 2006 still presented a final total of around 50 deaths.

The discrepancies are not only between NGOs, independent scientists and “official” estimates but within international organizations themselves. In 2000, as Secretary-General of the UN, Kofi Annan stated that more than 7 million people are still suffering, the exact number of victims may never be known, but 3 million children require treatment and many will die prematurely.¹⁰ In the same year, the International Federation of Red Cross and Red Crescent Societies, on the basis of medical screening in the three countries, found 83.1% of adults and 76.8% of the children were ill¹¹. The 2006 Greenpeace report, produced with contributions from hundreds of independent scientists from the three countries, concludes that in the three countries alone, the most recently published figures indicate that the accident resulted in an estimated 200,000 additional deaths between 1990 and 2004.¹²

⁷ UNSCEAR. *Source and Effects of Ionizing Radiation. Report to the General Assembly 1993.*

⁸ Committee Examining Radiation Risks of Internal Emitters. (CERRIE, UK) *Majority Report.* October 2004.

⁹ Alex Rosen. *Effects of the Chernobyl catastrophe: a literature review.* Cited above

¹⁰ Kofi Annan. Foreword: OCHA. *Chernobyl. A continuing catastrophe.* Geneva and New York. 2000.

¹¹ IFRCRCs. Foreword : Paul Fusco & Magdalena Caris. *Chernobyl Legacy.* De MO. New York, 2001.

¹² Greenpeace. *The Chernobyl catastrophe: consequences on human health.* Cited above.

RECOMMENDATIONS

The use of nuclear energy at the current stage of technical and scientific knowledge violates the precautionary principle. It endangers the life, health and the environment of a growing number of human beings and thereby violates their rights. For these reasons, the NGO signatories request that:

- Immediate health care, treatment and radioprotection should be provided to the affected populations in Ukraine, the Russian Federation and Belarus *on the basis of the existing health problems of individuals* in the population as assessed through medical screening by independent experts.
- The independence of WHO as international health authority *including* in matters of radiation and health must be assured. Revision of the 1959 Agreement between WHO and the IAEA should be put on the agenda of the next World Health Assembly and Abrogation of the Agreement on the agenda of the next UN General Assembly.
- A WHO Commission on Radiation and Health made up of independent experts with no connections, financial or otherwise, to the nuclear industry and all related entities such as the IAEA, should review available evidence on the health consequences of the Chernobyl catastrophe including all studies undertaken by independent researchers. The findings must be reported to the World Health Assembly and full proceedings made available to the public.
- Finally, the Human Rights Council should work towards implementation of these recommendations and the Special Rapporteurs on the Right to Health and the Right to Food should undertake a mission to the three countries most affected by the Chernobyl catastrophe and make recommendations to the Council and to the relevant UN bodies in order to alleviate the suffering of the victims

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THE WORLD HEALTH ORGANISATION AND NUCLEAR POWER

Chernobyl : The great cover up

By Alison KATZ

board member of Centre Europe Tiers Monde (CETIM), Geneva, and was for 18 years an international civil servant with the World Health Organisation

For 50 years dangerous concentrations of radionuclides have been accumulating in earth, air and water from weapons testing and reactor incidents. Yet serious studies of the effects of radiation on health have been obscured – not least by the World Health Organisation.

In June 2007 Gregory Hartl, World Health Organisation (WHO) spokesman for Sustainable Development and Healthy Environments, claimed that the proceedings of the international conference held in Geneva in 1995 on the health consequences of the Chernobyl disaster had been duly published ([1](#)). This was not so. And the proceedings of the Kiev conference in 2001 have never been published either. Challenged by journalists a few months later, the WHO repeated the claim, providing references to a collection of abstracts for the Kiev conference and just 12 articles (out of hundreds) submitted to the Geneva conference.

Since 26 April 2007 (the 21st anniversary of Chernobyl), a large placard has informed WHO employees each day that one million children in the area around Chernobyl are irradiated and ill. IndependentWHO, the group organising the action, accuses the WHO of a cover-up of the health consequences of the catastrophe, and of failing to assist populations in danger.

The WHO, they insist, must end the agreement made in 1959 which binds it to the International Atomic Energy Agency (IAEA) ([2](#)) and prevents it from initiating a programme or activity in the area of nuclear power without consulting the IAEA “with a view to adjusting the matter by mutual agreement” (Article 1, Point 2).

Independence from the IAEA would permit the WHO to conduct a serious, scientific evaluation of the disaster and provide appropriate health care to contaminated people. A resolution to this effect is in preparation for the World Health Assembly in May 2008 ([3](#)) and an Appeal by Health Professionals has been launched ([4](#)).

Industrial and military lobby

According to its statutes, the IAEA (a UN agency which reports to the Security Council) is mandated to “to accelerate and enlarge the contribution of atomic energy to peace, health and prosperity throughout the world”. It is in fact a lobby, industrial *and* military, which should have no role to play in public health policymaking or research.

The IAEA has vetoed conferences planned by WHO on radioactivity and health and, in turn, the WHO has endorsed the nuclear lobby’s grotesque statistics on mortality and morbidity relating to the Chernobyl accident – 56 dead and 4,000 thyroid cancers ([5](#)). Denial of disease inevitably implies denial of health care. Nine million people live in areas with very high levels of radioactivity; for 21 years now these populations have had no choice but to consume contaminated food, with devastating effects on their health ([6](#)).

For the nuclear lobby, any research indicating harm from ionising radiation represents a commercial threat that must at all costs be averted. Research on damage to the human genome (one of the most serious consequences of the contamination) was not part of the international project requested of the WHO in 1991 by the health ministers of Ukraine, Belarus and the Russian Federation. Yet dental caries was made a research priority. And although these countries had addressed their research request to the WHO, it was the IAEA which planned the project.

This conflict of interest has already been fatal for hundreds of thousands of people according to studies by independent scientists and institutions ([7](#)). And the greatest burden of disease and death is yet to come – given long latency periods, the increasing concentration of radionuclides in internal organs from food grown in contaminated soil, and damage to the human genome over many generations.

Hundreds of epidemiological studies in Ukraine, Belarus and the Russian Federation have established that there has been a significant rise in all types of cancer causing thousands of deaths, an increase in infant and perinatal mortality, a large number of spontaneous abortions, a growing number of deformities and genetic anomalies, disturbance and retardation of mental development, neuropsychological illness, blindness, and diseases of the respiratory, cardiovascular, gastrointestinal, urogenital and endocrine systems (8).

But who will believe them? Four months after the meltdown Morris Rosen, the IAEA's director of nuclear safety, said: "Even if there were an accident of this type every year, I would still regard nuclear power as a valuable source of energy" (9). Public information on the real health consequences of Chernobyl could seriously change the debate about nuclear options. And that is why the WHO is afraid of the children of Chernobyl.

Stronger than the tobacco lobby

For decades the tobacco, agrochemical and petrochemical lobbies have obstructed implementation of public health and environmental measures that might interfere with their profits. But the nuclear lobby is incomparably more powerful than any of these as it comprises governments of nuclear states, most significantly, the United States, the United Kingdom and France, and powerful intergovernmental organisations. The disinformation emanating from industrial and military lobbies is overwhelming – and dangerously, it carries state authority.

Furthermore, the corruption of science also concerns our most prestigious academic institutions which, as an editorial in *The Lancet* reported, "have become businesses in their own right, seeking to commercialise for themselves research discoveries rather than preserve their independent scholarly status" (10). Peer-reviewed studies, cited as evidence of the safety of nuclear activities, all too often emanate from, or are financed by, the nuclear lobby.

Corporate science, through denial, cover-ups and lies, has brought us to the brink of self-destruction in relation to global warming. So how can we contemplate trusting corporate science in relation to nuclear power? While the emissions responsible for climate change are amenable to control (in theory), nuclear technology and its waste products are not, and its consequences, even if nuclear activities ceased tomorrow, will affect life on earth for millennia.

The "science" that has informed the nuclear debate in general, and the Chernobyl catastrophe in particular, is corporate science in which the industry is judge and jury in relation to the health consequences of its own activities. The entire edifice of nuclear institutions, governmental, regulatory, military, industrial, scientific, research and intergovernmental, including Euratom and some UN agencies, is one incestuous happy family (11).

Pseudo science

The flaws in this pseudo science range from the flagrant and preposterous to the subtle and dishonest, as shown by expert Chris Busby, journalist Wladimir Tchertkoff, as well as the Permanent People's Tribunal (12).

The first category includes falsification and suppression of data; failure to measure exposure, screen for cancer and investigate the relationship between the two; attacks on independent researchers and their institutions; censorship of studies revealing adverse effects, discounting thousands of untranslated studies from the three most affected countries; and exclusion from conference agendas of entire scientific domains (such as the health effects of chronic, low dose, internal radiation, accounting for almost all the contamination in populations around Chernobyl).

The second category involves dozens of manipulations of data, among them: averaging exposures over entire populations and ignoring local sources of concentrated contamination; ending studies after 10 years thereby excluding long term morbidity and mortality; qualifying five year survival as "cure", only considering cancer, those still alive and the three most affected countries; claiming decreases in childhood cancers when in fact children have become adults with cancer and therefore no longer appear in that database.

According to the National Cancer Institute, cancer incidence (all sites) in the US increased by 55% between 1950 and 1995; the trends in Europe and other industrialised nations are similar. Non-smoking related cancers are responsible for about 75% of the overall increased incidence of cancer since 1950, and cannot be explained in terms of better detection or ageing (13). Cancer incidence increases in parallel with gross national product and industrialisation but the obvious explanation for this phenomenon – environmental pollution, chemical and radioactive – is ignored. Perversely, victims are blamed for their lifestyles.

Complicity of academe

The cancer epidemic is already affecting more privileged and articulate sectors of society who are demanding serious scientific explanations and real primary prevention, which means addressing root causes – chemical and radioactive pollution – not screening for early detection of disease, which is secondary prevention. Patients' associations are calling for a boycott of the powerful cancer charities, closely linked with the billion dollar medical equipment and pharmaceutical industries, and cancer victims are attempting to bring those responsible for the cover-up to justice (14).

The commercialisation of science and the close relationship between industry and academic institutions should be at the centre of the WHO's concerns. Upon election as director-general, Margaret Chan cited technical authority as one of the WHO's unique assets. "We can be absolutely authoritative in our guidance," she said. In the area of radiation and health, it would be more accurate to say that the IAEA (which has no competence in public health) can be absolutely authoritative in the WHO's guidance.

Can we count on the WHO's member states to take action? The *Lancet* editorial noted: "Governments, nationally and regionally, have consistently failed to put their people before profit" (15). We need serious, independent research on the health consequences of civil and military nuclear activities, and the results disseminated without hindrance.

(1) Charaf Abdessemed, "Les antinucléaires font le piquet devant l'OMS", *Geneva Home Information*, 6-7 June 2007.

(2) The IAEA is an autonomous organisation placed under the auspices of the United Nations in 1957; it serves as the world's intergovernmental forum for technical cooperation in the peaceful uses of nuclear technology.

(3) During the Assembly, delegates of 193 member states decide on the organisation's policy.

(4) See www.independentwho.info/spip.php?ar...

(5) The Chernobyl Forum, "Chernobyl's Legacy: Health, Environmental and Socio-Economic Impacts", Vienna, April 2006.

(6) Michel Fernex, "La santé: état des lieux vingt ans après" in Galia Ackerman, Guillaume Grandazzi and Frédérick Lermarchand, *Les Silences de Tchernobyl*, Autrement, Paris, 2006.

(7) Pierpaolo Mittica with Rosalie Bertell, Naomi Rosenblum and Wladimir Tchertkoff, *Chernobyl: the hidden legacy*, Trolley Ltd, London, 2007.

(8) Alex Rosen. "[Effects of the Chernobyl catastrophe: literature review](#)", January 2006.

(9) *Le Monde*, 28 August 1986.

(10) "The tightening grip of big pharma", *The Lancet*, vol 357, n° 9263, London, 14 April 2001.

(11) Rosalie Bertell, *No immediate danger: prognosis for a radioactive earth*, Women's Press, Toronto, 1985.

(12) Chris Busby, *Wolves of water: a study constructed from atomic radiation, morality, epidemiology, science, bias, philosophy and death*, Green Audit, Aberystwith, 2006; Wladimir Tchertkoff, *Le crime de Tchernobyl: le goulag nucléaire*, Actes Sud, Arles, 2006 ; Permanent People's Tribunal, International Medical Commission on Chernobyl, "Chernobyl: Environmental health and human rights", Vienna, 12-15 April 1996.

(13) Samuel Epstein, *Cancer-Gate: How to win the losing cancer war*, Baywood, New York, 2005.

(14) In France for example, Professor Pierre Pellerin (director at the time of the Central Service of Protection from Ionising Radiation) is being tried for fraud in the case of Chernobyl and thyroid patients.

(15) *The Lancet*, op cit.