



Health effects of naturally occurring radionuclides in drinking water



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CORES symposium on radon and NORM

Ecological studies of radionuclides and cancer

- Majority of studies assessing health effects of natural radionuclides have been geographical correlation studies
- They compare typical exposure levels and occurrence of cancer (incidence or mortality) in the entire population
 - Exposure indicators crude
 - Often the cancer rates for population with both exposed and unexposed people
 - No individual level data
 - No information on exposure among cancer cases specifically
 - Associations, rather than effects
 - Cross-level bias (ecological fallacy): Relationships at aggregate level do not necessarily reflect those at individual level
 - Rarely information on other risk factors for cancer

Radium and cancer: Ecological studies

Reference	Region	Exposure	Outcome	Findings	Comment
Lyman 1986	Florida, 27 counties	50 private wells, counties with >10% exceeding 5 pCi/l	Leukemia incidence and mortality	Leukemia incidence associated with Ra, but not mortality	Only 14% of population using wells
O'Brien 1987	Florida, 27 counties	As above	Leukemia and bone cancer mortality 1978-82	For AML, RR=1.4 (95% CI 1.2-1.7), no association for all leukemia or bone cancer	1/3 of the population had moved to area within 5 years
Bean 1982	Iowa, 28 towns (9 with 'high exposure')	Tap water, Ra226 >5 pCi/l	Incidence of six cancer types 1969-74	Incidence of lung, breast and male bladder increased (RR 1.3-1.7), colon, rectum and prostate not	Effect of smoking?

Studies on radium and cancer

- Guse et al. 2002
- Wisconsin, USA
- Zip code areas
- Radium activity concentrations in public water supplies
 - Exposure levels around 2 pCi/l (mean and median) ~0.07 Bq/l
- Semi-ecological design: Exposure assigned based on residential area of the cases and controls
- Cases with **osteosarcoma** (N=319)
- Controls (N=3198)
- Odds ratio 0.98 (95% CI 0.93-1.04) per pCi/l

Radon and childhood leukemia

- Kohli et al 2000
- Semi-ecological study
- Cohort with 50,000 children, only 22 cases during 9-year follow-up
- Residence classified as low to high radon risk, based on radon maps
- Some indications of increased risk associated with 'high-radon areas' but findings inconsistent

Drinking water uranium and cancer: Ecological studies

Reference	Region	Exposure	Outcome	Results	Comments
Piispanen 1991	Northern Finland, 261 regions (25x25 km)	Not described	Cancer incidence 1972-1982	Both negative and positive correlations	Exploratory analysis
Wagner 2011	South Carolina, 169 census tracts	Groundwater uranium, quartiles (highest >0.84 µg/l)	Breast kidney and colorectal cancer incidence 1996-2005	Non-significant positive correlation	Inadequate exposure assessment
Radespiel-Tröger 2013	Bavaria, 461 municipalities	Tap water, mean 0.9 µg/l	Cancer incidence in 2002-2008	For U>5 µg/l, incidence of male leukemia and kidney cancer increased, no association with colorectal, lung, breast, prostate, bladder	

Radon in drinking water and cancer, ecological studies

Reference	Region	Exposure	Outcome	Results	Comments
Hess 1983	Maine, 16 counties	Wells	Mortality from lung, reproductive and all cancers 1950-69	Associations with female lung cancer, male reproductive cancers, all female cancers (r=0.5-0.6)	Only correlation coefficients reported
Collman 1991	North Carolina, 75 counties	Public water supplies, tertiles (high exposure >1400 Bq/l)	Childhood leukemia, childhood cancers, adult cancers	RR 1.3 for childhood leukemia, 1.2 for all childhood cancer, no association with adult cancers	
Messier 2017	South Carolina, census tracts	Groundwater	Stomach and lung cancer incidence 1999-2009	Increases in lung cancer with 3% per 100 Bq/l, 'high-radon cluster' with RR=1.3 for both lung and stomach cancer	Exposure assessment?

Individual levels studies

- Case-control, cohort or case-cohort design
- Exposure assessment for each participant
- Information on other risk factors
- Risk estimates per unit dose

Radium and osteosarcoma

- Finkelstein & Krieger 1996
- 238 cases with child/adolescent osteosarcoma
 - Dg 1964-1988
- 432 controls with other cancers
- Only <50% of eligible subjects recruited
- Water samples from each dwelling only for 14% of cases and 10% of controls
- High vs low exposure (>0.7 mBq/l vs <0.7 mBq/l) OR=1.2 (95% CI 0.8-1.8)
 - No dose-response

Finnish case-cohort study

- Kurttio et al. 2006, Auvinen et al. 2002, 2005
- Cohort of 140,000 outside municipal water system
- Analysis restricted to wells drilled in bedrock
- 'Controls': Sample from the cohort
 - Average radon 320 Bq/l (median 130 Bq/l)
 - Average uranium 0.1 Bq/l (U-234 & U-238)
 - Average radium-226 0.01 Bq/l
- Cases
 - 88 stomach cancer
 - 61 bladder cancer
 - 51 kidney cancer
 - 35 leukemia
- Annual effective doses 0.1-0.3 mSv/year, mainly kidney and bone marrow
- No clear associations observed, wide confidence intervals due to small sample size

Kidney effects of uranium in drinking water

Uranium and the kidney

- Uranium is a heavy metal
- Chemical toxicity affecting mainly proximal tubulus
- Clear evidence from animal studies
- Provisional guideline value of WHO (2012) 30 µg/l

Human (population-level) studies

Reference	Uranium	Indicator	Participants	Findings	Comments
Kurttio 2002	Median 15 µg/l, Intake 36 µg/d	Fractional excretion of calcium, phosphate, glucose, NAD. LDH, ALP, GGT, GST	325 Finns with wells drilled in bedrock	Increased calcium and phosphate excretion, no effect on others	
Mao et al. 1995	Exposed group 15-20 µg/l	Urine albumin/creatinine	60 exposed, 40 non- exposed	Increased albuminuria	Effect not seen in albumin concentrati on
Limson Zamora 1998	Median in high- exposure group 100 µg/l	Urinary glucose, LD, GGT, AFOS, creatinine, protein	30 high, 20 low exposure	Increased glucose excretion (also LD in men)	
Selden 2009	Median 7 µg/l, mean 25 µg/l	U-glucose, phosphate, calcium, NA, albumin, protein creatinine	301 Swedes with wells drilled in bedrock	Increased beta-2- macroglobulin, no dose-response	No effect on other indicators