

ATOMIC ENERGY COMMISSION WASHINGTON, D.C. 20545

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AUG 7 1974

Mr. Thomas S. Dunmire, Staff Consultant Committee on Interior and Insular Affairs House of Representatives

Dear Mr. Dunmire:

This is in response to your request of June 13, 1974, to Dr. S. Marks of my staff for AEC comments on a report of the Special Joint Committee Concerning Rongelap and Utirik Atolls of the Congress of Micronesia. The report provides documentation supporting a request for compensation for damages to the Rongelap and Utirik Atolls and their inhabitants resulting from the thermonuclear test conducted on Bikini Atoll on March 1, 1954.

Briefly stated, the report requests the following types of compensation:

- 1. Payments of \$50,000 each to the mother and father of the deceased leukemia patient;
- 2. Payments of \$25,000 each to persons who have had thyroid operations because of radiation-induced disease;
- 3. Payments of \$1,000 each to the people of Utirik who were relocated subsequent to the test; and
- 4. Funds of \$25,000 annually for community purposes for each atoll (Rongelap and Utirik) in addition to the usual Grant Fund appropriations by the U. S. Congress.

In February 1960, legal action was initiated on behalf of the inhabitants of Rongelap Atoll to seek compensation for damages suffered as a consequence of the test. Although the suit was dismissed for lack of jurisdiction of the court in the Trust Territory, the complaint was considered to have merit by the United States Congress. Accordingly, legislation was enacted on August 22, 1964 (P.L. 88-485), to provide compensation to the people of Rongelap.

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TAB D - AEC's Recommendations

P.L. 88-485 provided \$950,000 (less 5% for legal fees) in equal payments to 82 exposed inhabitants of Rongelap Atoll or their heirs. The individual payments amounted to about \$11,000. P.L. 88-485 contained a provision to the effect that "payment made under the provisions of this Act shall be in full settlement and discharge of all claims against the ... United States arising out of the thermonuclear detonation on March 1, 1954." That release provision operated to discharge all obligations of ... the U.S. Government, including any that might arise from further damage suffered by the inhabitants. However, the statute expressed the wish of Congress to assume "compassionate responsibility" to compensate the Rongelapese for their "radiation exposures." The failure to anticipate health effects that were not evident at the time the legislation was under consideration by the Congress but which have become apparent since then could provide the basis for reopening the issue of compensation.

It is well known that radiation injury may give rise to tumor development after a period of pany years. The inadequacy of the period of observation until 1963 for the occurrence or detection of such late effects was expressed in a letter dated March 14, 1963, from John A. Carver, Jr., Assistant Secretary of the Interior, to Hon. Wayne N. Aspinall, Chairman, Committee on Interior and Insular Affairs, House of Representatives. The letter is included in H.R. Report No. 110, part of the legislative history of P.L. 88-485. The relevant portions of the letter are as follows:

In the period immediately following the fallout, many of the Rongelapese were affected by nausea and itching, a substantial number sustained temporary skin burns, and somewhat less than half sustained some degree of loss of hair, also temporary. In some cases there remain some scarring and pigment change at the former site of deeper burns but no evidence of cancerous change in these scars has been noted. In all of the Rongelapese there was significant depression of their blood-forming organs during the 2 months following exposure; recovery has taken place in the years since and the counts are now generally considered within normal ranges, although there are a few instances where the counts are lower than in comparable unaffected individuals.

There is, to date, no evidence of leukemia nor of radiation illness. Further, whether or not the radiation has had any life-shortening effects is not apparent. It does appear, however, that bone development in young children who were affected by the fallout may have been retarded, and also that there is a possibility of a somewhat greater incidence of miscarriages and stillbirths among the exposed women. Neither sufficient time has elapsed nor sufficient knowledge acquired to permit positive conclusions to be drawn as to the long-range effect of the fallout on the Rongelapese.

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Since the submission of Mr. Carver's letter, numerous cases of thyroid disease have appeared in the exposed population and a fatal case of leukemia occurred in 1972. Of the 64 Rongelap inhabitants who were present on Rongelap Atoll at the time of the test, 21 have developed thyroid tumors; three were malignant. Age was a factor in the incidence of thyroid disease in that 17 of the 21 cases of thyroid tumors occurred among the 19 individuals who were less than ten years of age at the time of the test. An additional four cases of thyroid tumors developed among 18 Rongelapese of all ages who happened to be on the neighboring Ailinginae Atoll at the time of the test and who received a smaller radiation dose.

There is no question that radioactive iodine in the fallout was responsible for the high incidence of thyroid tumors in the Rongelap inhabitants.

It is difficult to establish a causative relationship between radiation exposure and any single case of leukemia. However, the observations that the individual who developed leukemia was one year old at the time of the thermonuclear test and had required thyroid surgery for tumors before the onset of leukemia are suggestive of a relationship between the exposure and the leukemia.

The inhabitants of Utirik received only small radiation exposures as a result of the test. The people were evacuated from their Atoll and relocated elsewhere for a few months. However, during the last twenty years, the people of Utirik have felt that they are entitled to some compensation because of their radiation exposure and the forced evacuation from their Atoll. Although they recognize that the risk and dislocation were much less than those of the Rongelapese, the Utirik inhabitants have reasoned by analogy that their lesser risk and inconvenience warrant compensation, albeit smaller than that provided to the people of Rongelap. Since the Utirik people have cooperated with the Brookhaven National Laboratory medical team in medical follow-up examinations through the years, the AEC provided to the Trust Territory on June 25, 1974, a sum of \$18,212 to be disbursed in equal payments of \$116 to each exposed inhabitant or his heirs. The compensation requested by the Special Joint Committee for the Utirik people would be in addition to the AEC payment and would be for inconvenience experienced in relation to the 1954 test.

The nature and amount of compensation provided to the people of Rongelap by the Congress under P.L. 88-485 was based on the information available at the time Congressional action was taken on the bills. That information as presented in Mr. Carver's letter included only the minor and indefinite medical effects observed up to that time. The thyroid tumors and leukemia described above were neither evident nor predicted at the time of Congressional action. The medical developments that have occurred since

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the statute was passed justify favorable consideration of further compensation to those particular individuals who have experienced significant medical damage related to their radiation exposure.

In view of the above, the AEC recommends the following:

- .1. The heirs (parents) of the leukemia patient should receive additional compensation.
- 2. The exposed Rongelap inhabitants who have had thyroid operations for radiation-related disease should receive additional compensation.
- 3. Consideration should be given to providing some compensation to the Utirik inhabitants in addition to the AEC payment on June 25, 1974.
- 4. No position is taken relative to funds for community purposes since such matters more properly fall within the purview of the Department of the Interior rather than the Atomic Energy Commission.

We assume that additional compensation, if authorized by the Congress, would be provided through a mechanism similar to that employed in P.L. 88-435, namely, through disbursement of specially appropriated funds by the Secretary of the Interior. Therefore, the precise amount of any additional compensation is not considered an appropriate matter for AEC comment and is not addressed in this letter.

If we may be of assistance in providing the Committee with additional information, especially with respect to scientific findings in the exposed Marshallese population, we will be pleased to furnish it.

Sincerely,

James L. Liverman, Director Division of Biomedical and Environmental Research

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