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FOLDER BIOMED - Dr. CONRAD  
7 thru 12/1975

TRIP REPORT: LCU VOYAGE #5

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Submitted by:

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## INTRODUCTION

As part of Brookhaven National Laboratory's medical surveillance of Marshellese people exposed to radioactive fallout, quarterly medical visits are conducted to the atolls of Rongelap and Utirik. The primary purpose of these visits is to assess for medical problems that might be the result of the exposure. As a secondary objective, general health care is provided to the people of the atolls through a cooperative effort with the government of the Trust Territory of the Pacific Islands.

LCU voyage #5 was conducted from November 14 to November 28, 1975 to meet these objectives. As presented in the operation plan submitted prior to the trip, general medical assessment of the people was performed as well as medical and pediatric clinics for the general populations.

## LOGISTIC SUPPORT

Logistic support for the mission was provided by Global Associates and the U.S. Army at Kwajalein. Coordination of the supply effort was admirably handled by Ted Murawski who was responsible for a smoothly run support operation. All equipment was functioning and on board the vessel prior to departure. The ERDA vessel, R.V. LIKTANUR, which had experienced generator difficulties during the previous voyage, was overhauled and made ready to go through the efforts of Jack Vierra and Fred Olson of the Global Marine Department.

A problem was encountered with the desired logistics support from the Trust Territory. For several reasons, the District Director of Health

Services in Majuro was unable to provide the requested personnel and medical supplies. At the last minute, through the efforts of Larry Edwards, acting Distad Representative Kwajalein, a nurse trainee, laboratory technician and limited medical supplies were obtained from the Ebeye Hospital.

#### MISSION ACCOMPLISHMENTS

At both Rongelap and Utirik health care was extended to all people of the atolls. Clinics were conducted in the following areas:

1. general health care
2. immunization and well child care
3. prenatal care
4. venereal disease and cervical cancer detection

Due to limitations of supply and personnel, the scope of the care provided in these clinics had to be curtailed somewhat.

The statistics from Rongelap showed that a total of 101 patient visits were made. This figure represented 58 patients for acute care and 26 infants for immunization. At Utirik the figures were 126 patient visits, representing 94 acute care patients and 20 infants for immunizations.

No problems were encountered with the facilities or actual clinic operation. Relations with the Marshellese people on both atolls were good with no evidence of any concern as a result of the present Bikini situation. Great appreciation was shown by the people for the care provided.

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## DISCUSSION

The entire medical survey was carried out in a most successful manner.- Captain Pete Brusasco and the crew of the R.V. LIKTANUR had all equipment operating perfectly and there was no delay in any aspect of the operation. The medical examination trailer, despite its suffering from exposure to the weather, was most convenient in facilitation of the examinations.

The difficulties in obtaining support from the Trust Territory in Majuro were somewhat frustrating. It is hoped that close cooperation can be developed with health officials of the Trust Territory so that these quarterly visits can help to improve health care delivery to the outer atolls of Rongelap, Utirik, and Bikini. The particular problems encountered with this voyage centered on a failure of health officials in Majuro to make the necessary administrative decisions to provide the personnel and supplies requested. The problems might have been prevented by more positive, firmer, and longer range planning on the part of the Party Chief and the District Director of Health Services. There is no desire to use the staff and supplies from the Ebeye Hospital as this facility suffers from chronic shortages in both areas.

The nurse, Billiam Lang, and the laboratory technician, Tommy Lang, who accompanied the trip both performed well. Educational sessions were provided for both of these personnel during the examinations so that they received some training during the trip as well as patient experience. For Billiam it was especially gratifying to be along on the voyage as she is one of the exposed Rongelap people and it was her first visit back to

her home atoll in over ten years.

Due to limitations on supplies and personnel, the various medical clinics had to be limited in scope. The general medical examinations were conducted without difficulties. The immunization clinic suffered from a shortage or lack of certain vaccines. A diabetic clinic could not be performed due to a lack of supplies. Educational sessions in family planning, hygiene, and nutrition could not be carried out as originally planned. However, a discussion was held before initiation of the clinics with all the women of each village to explain the nature of the clinics oriented towards the children and the female populations. These discussions seemed to be well received and provide a starting point for future work.

The addition of a skilled female public health nurse as part of the personnel accompanying these surveys would do much to improve the health care of the people. She would be extremely helpful during the examinations and also for special procedures. More importantly, her educational skills and close association with the female population would improve not only direct health care but health information collection as well. Close cooperation between Trust Territory health officials and the resident physician can develop such a program in the future.

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