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## Bias in Predicted Plutonium Organ Activities for Manhattan Project Workers

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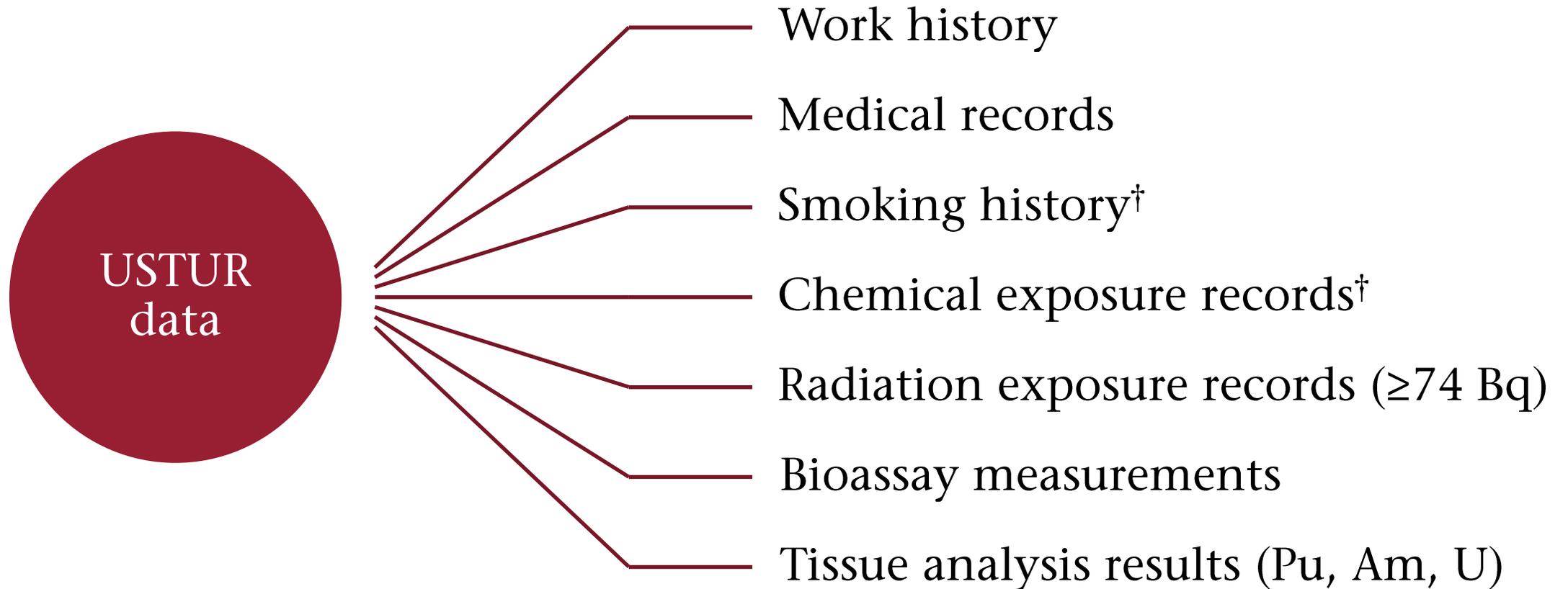


# Motivation

- In radiation epidemiology, worksite records and bioassay measurements are used to estimate the organ doses
- Bioassay data are typically collected by worksite and may not be available after the end of employment
- Post-mortem tissue/organ analyses can be used to evaluate the accuracy of the reference biokinetic and dosimetric models used for radiation epidemiology



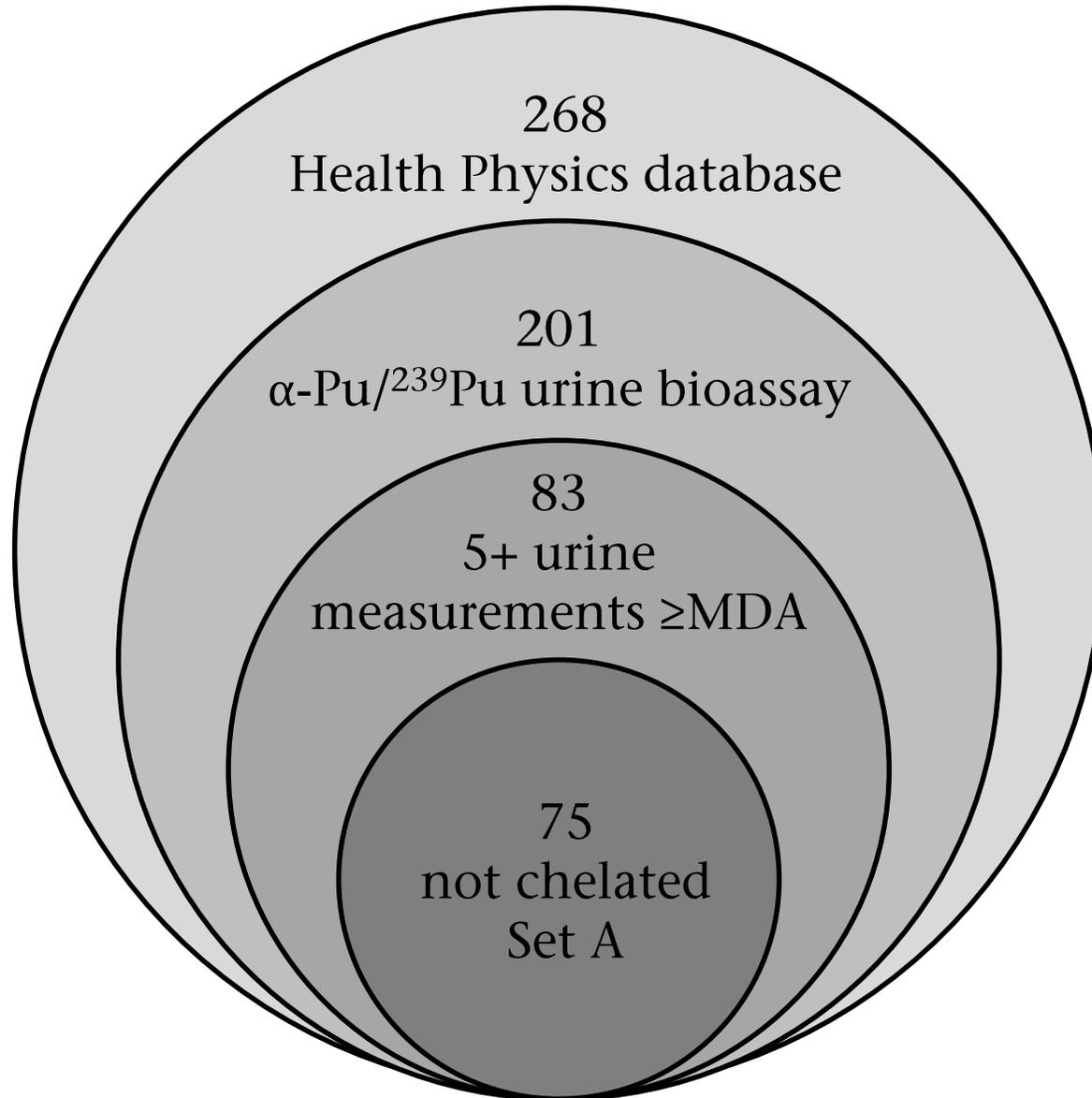
# Unique Data Resource



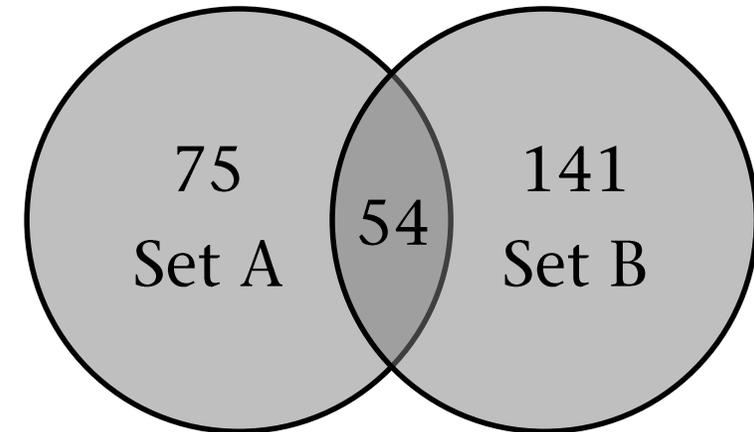
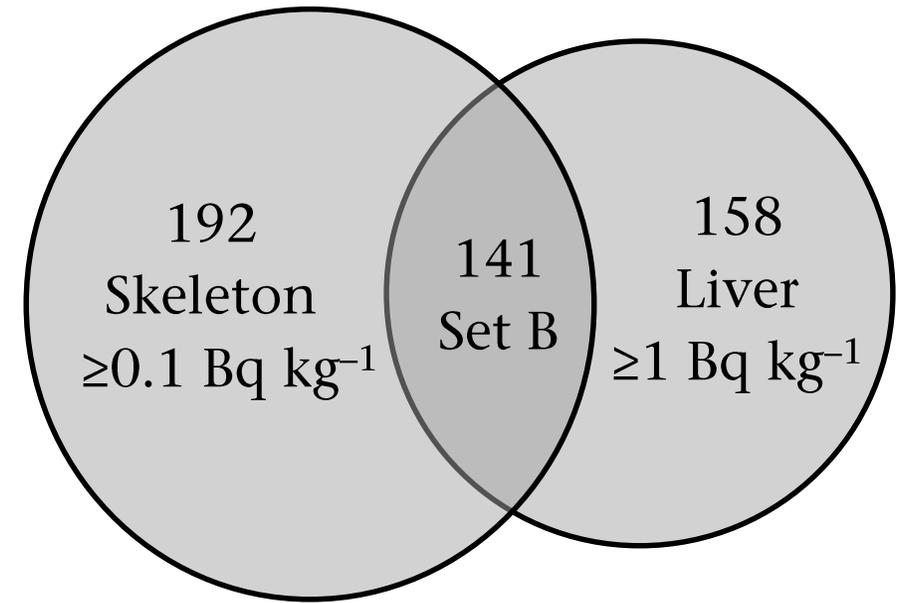
† - self-reported data



# Case Selection Criteria



## Radiochemical analysis





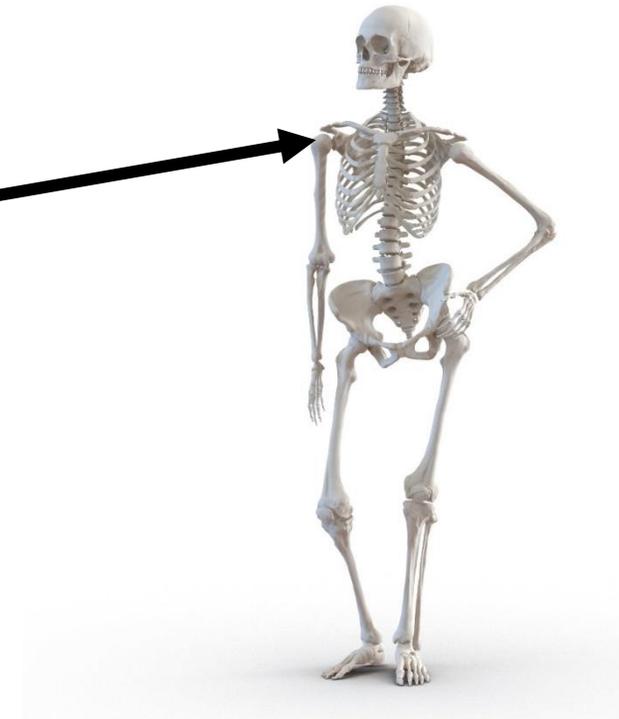
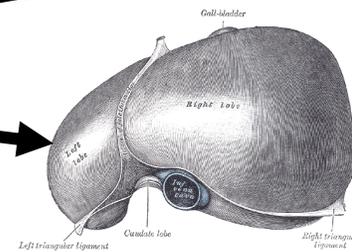
# Studied Group – “You Pee Pu” (UPPU)

- Worksite: Los Alamos Scientific Laboratory
- Exposure period: 1944–1948 (Manhattan Project)
- Post-exposure follow-up: 1953–1997
- Studied cases: 7 whole-body, 4 partial-body
- Route of intake: chronic inhalation, 0.3  $\mu\text{m}$  (AMAD)
- Material: 78%  $\text{Pu}(\text{NO}_3)_4$ , 22% refractory  $\text{PuO}_2$
- Post-mortem organ activity:
  - Liver: 27.8–927 Bq
  - Skeleton: 48.6–897 Bq



# Objective

- Comparison of plutonium activity in *liver* and *skeleton* predicted from *urine bioassay* collected *during* and/or *after employment* with *post-mortem* radiochemical analyses



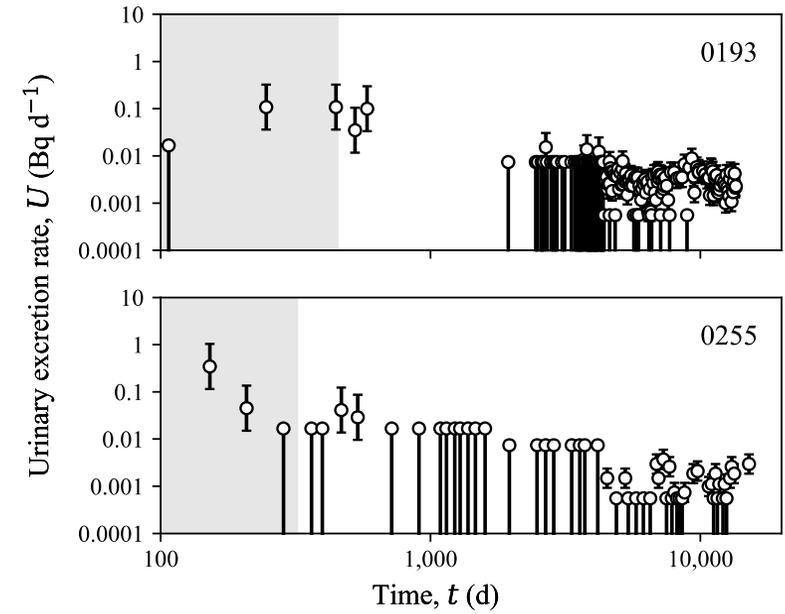
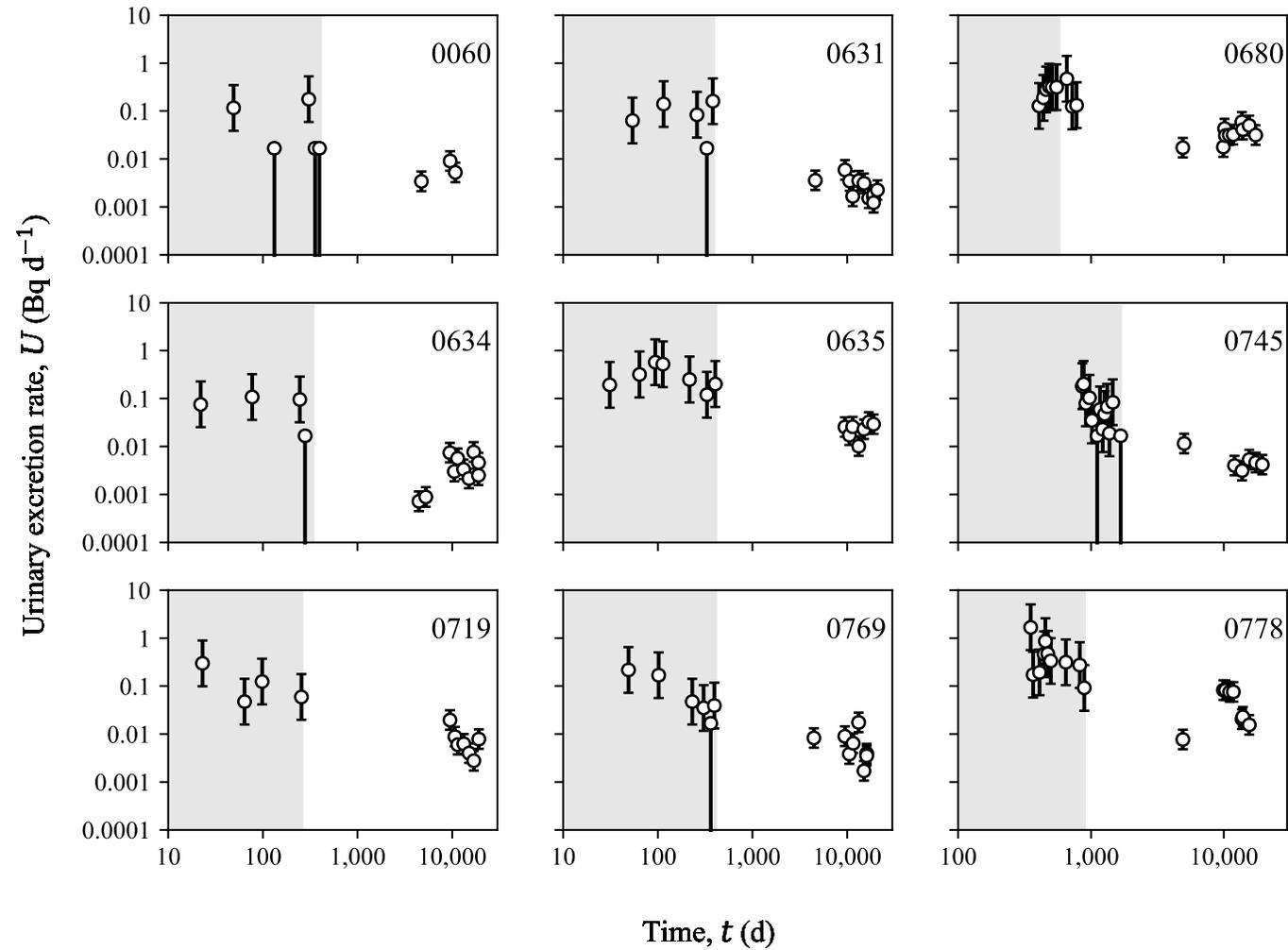
Bioassay Monitoring at Los Alamos: *A Guide for workers and their families.*

Henry Gray. *Anatomy of the Human Body*

<https://www.turbosquid.com/3d-models/3d-human-female-skeleton-pose/1025026>



# Urine bioassay





# Post-mortem organ activity estimation

- Organ activity (Bq) = Concentration (Bq/kg) × Weight (kg)
- Liver: concentration and weight measured
- Skeleton: concentration and weight estimated or measured

Skeleton	Activity concentration based on analysis of	Weight
Whole body	70–90 bone samples (right side of the skeleton)	Measured
Partial body	4–8 bone samples	Estimated*

\*Avtandilashvili M, Tolmachev SY. Modeling the Skeleton Weight of an Adult Caucasian Man. Health Phys. 117(2):149–155; 2019.



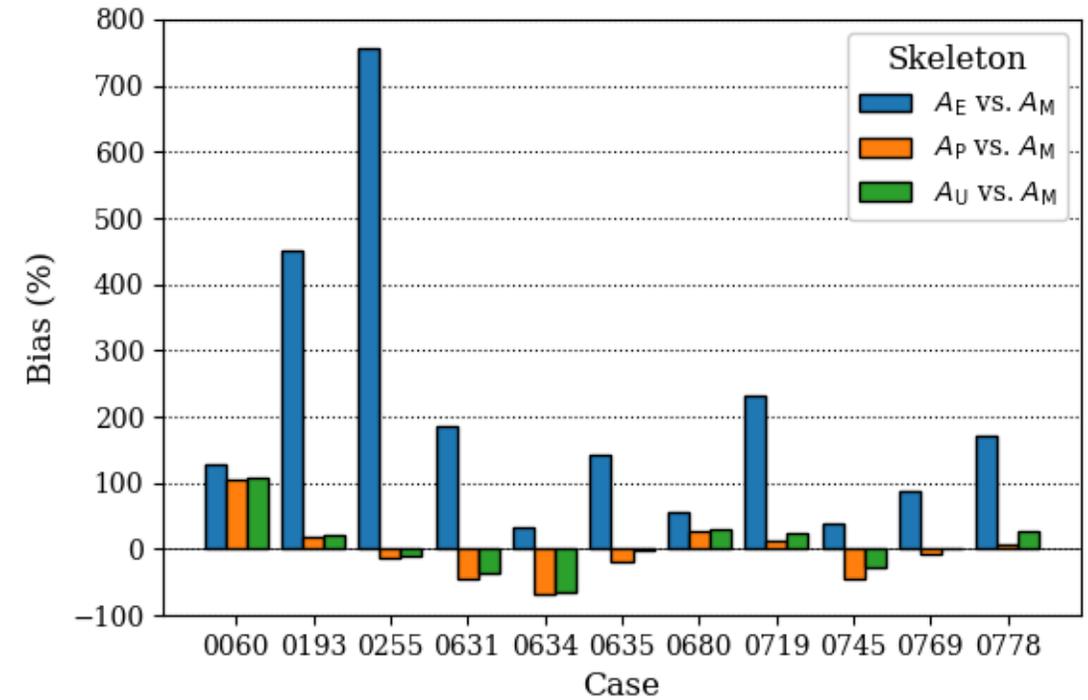
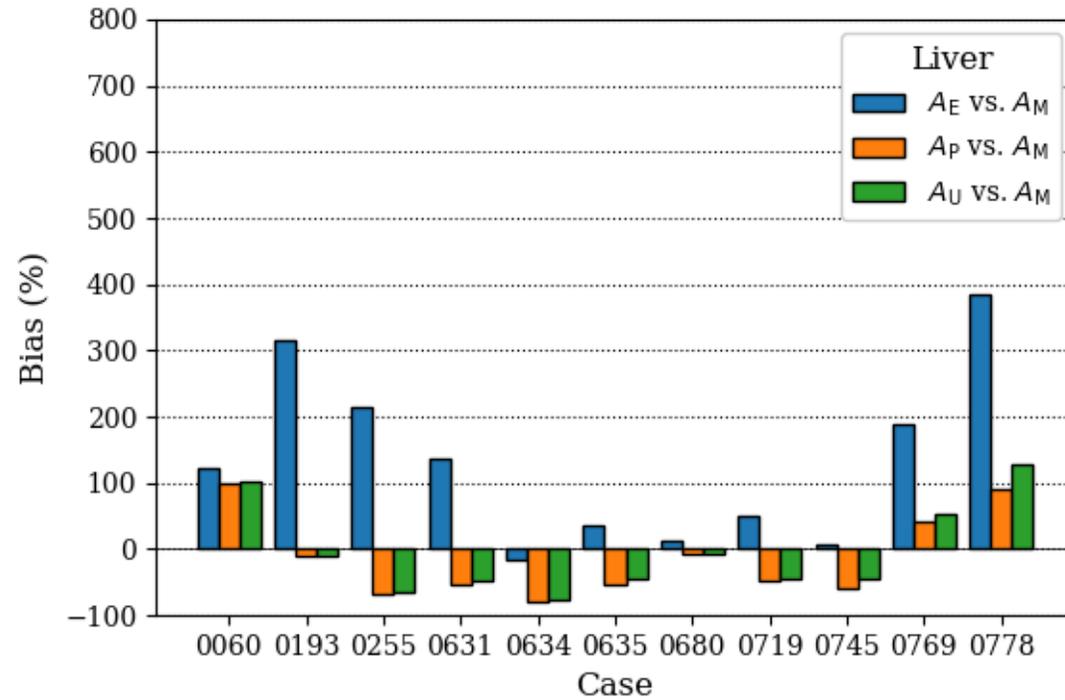
# Bias in Organ Activity

- IMBA Professional Plus fit of *urine bioassay* to estimate intake
- Predict plutonium activities  $A_{E/P/U}$  (Bq) in liver and skeleton at the time of death
- Compare to *measured* post-mortem organ activities  $A_M$
- $A_E$  – using urine data collected during *exposure* period
- $A_P$  – using urine data collected *post-exposure*
- $A_U$  – using *all* available urine data

$$\text{Bias}(\%) = \frac{A_{E/P/U} - A_M}{A_M} \times 100$$



# Bias in Liver and Skeleton Activity

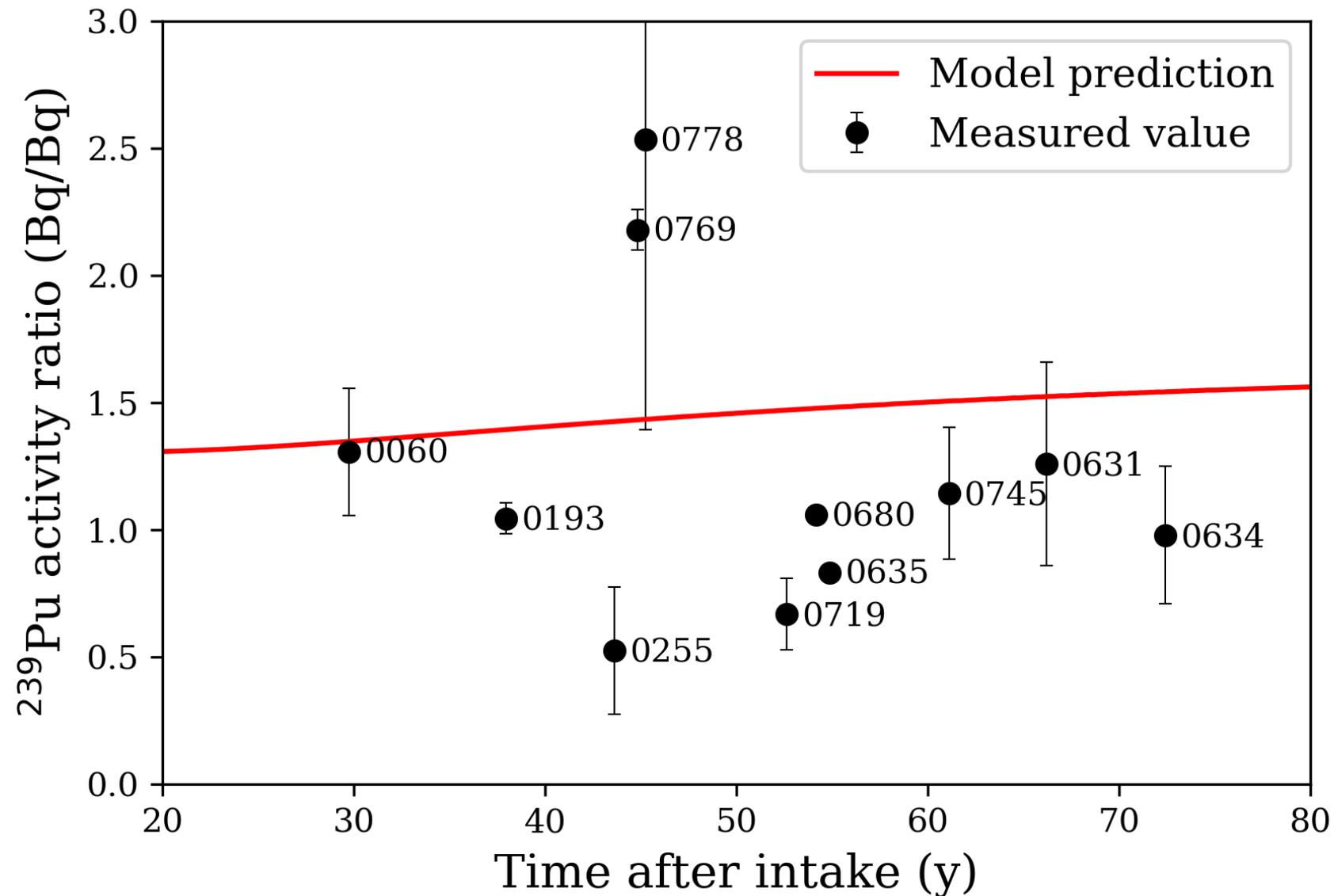


Mean absolute bias	Liver (%)	Skeleton (%)
$A_E$ vs. $A_M$	135±132	208±217
$A_P$ vs. $A_M$	56±64	33±46
$A_U$ vs. $A_M$	57±70	32±46



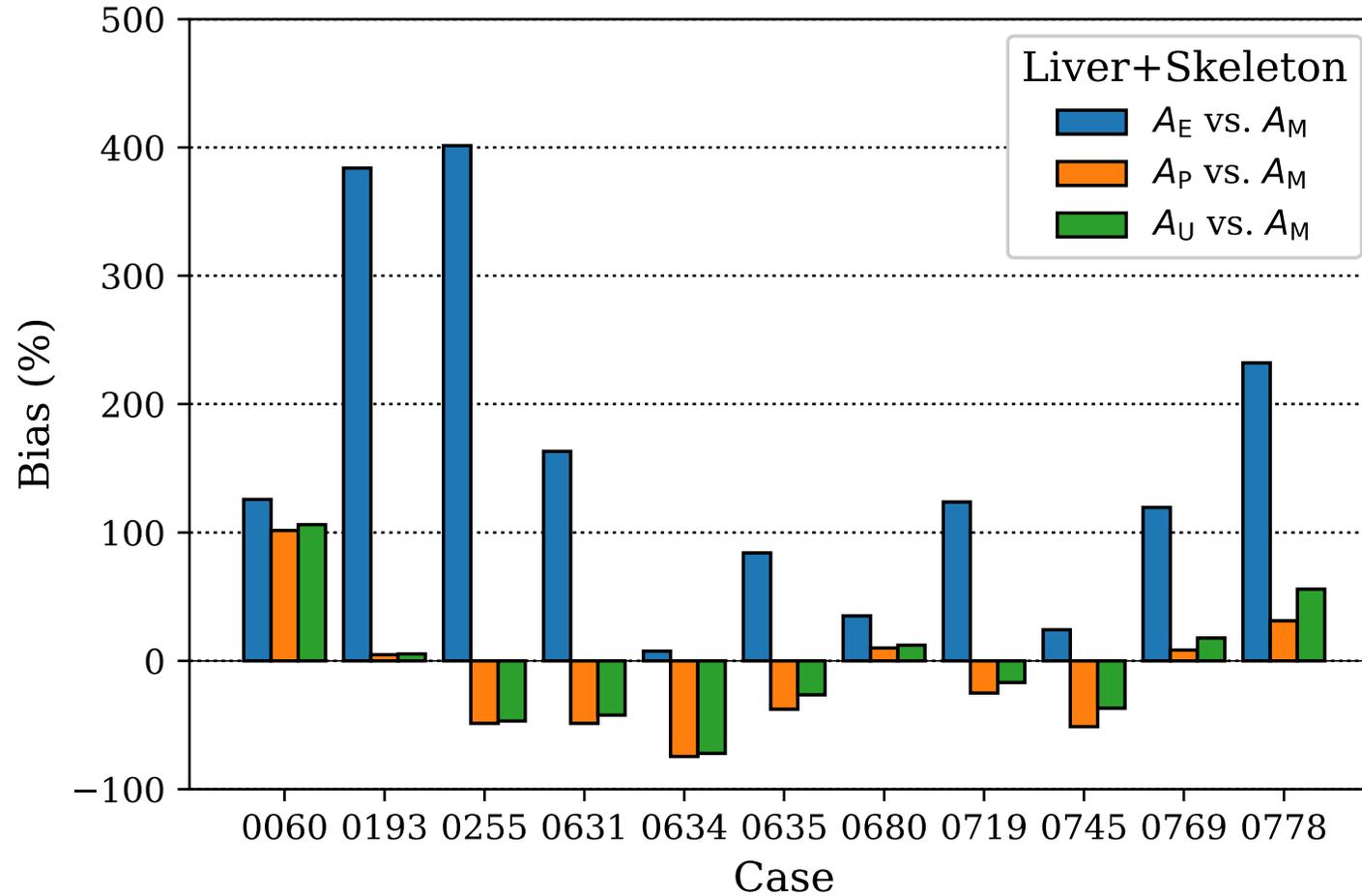


# Skeleton-to-Liver Activity Ratio





# Bias in Liver+Skeleton Activity



Mean absolute bias (%)	
$A_E$ vs. $A_M$	155±134
$A_P$ vs. $A_M$	40±50
$A_U$ vs. $A_M$	40±51



# Conclusions

For this study group:

- Using only urine data collected during exposure period overestimated the plutonium liver+skeleton (systemic) activity by factor of 2.6
  - Number and quality of the early urine measurements
  - Uncertainty of the intake scenario (time)
- Using all urine data including post-exposure follow-up measurements improved the activity estimate
  - The estimate was driven by post-exposure follow-up data

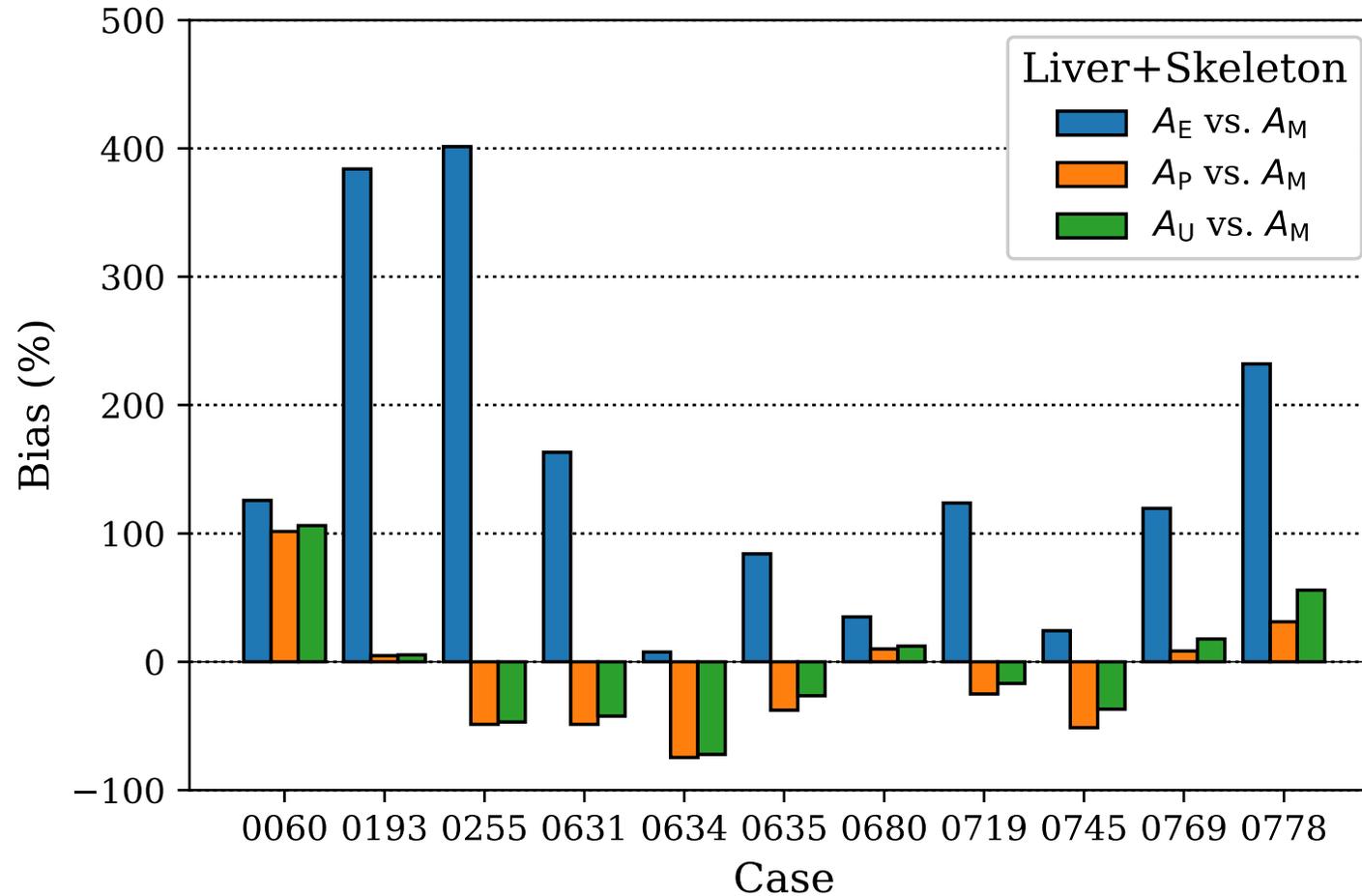


Thank you!





# Bias in Liver+Skeleton Activity



Mean bias (%)	
$A_E$ vs. $A_M$	$155 \pm 134$
$A_P$ vs. $A_M$	$-12 \pm 50$
$A_U$ vs. $A_M$	$-4 \pm 51$

Mean absolute bias (%)	
$A_E$ vs. $A_M$	$155 \pm 134$
$A_P$ vs. $A_M$	$40 \pm 50$
$A_U$ vs. $A_M$	$40 \pm 51$