JOHNS HOPKINS BLOOMBERG SCHOOL of PUBLIC HEALTH

Risk Assessment and Risk Communication

Radiation Epidemiology Course

National Cancer Institute

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Attributable Risk

The Surgeon General estimates 440,000 smoking attributable deaths in 2000.

What does this mean?

WHO COUNTS??

How Would You Explain?

- A future risk of cancer for CT evaluation of CF patients estimated as 0.02% for males with median survival to age 36 years?
- An increase in risk for radiation caused cancer of 410 per 0.1 Gy?
- A lifetime increase in risk of cancer of 1%?

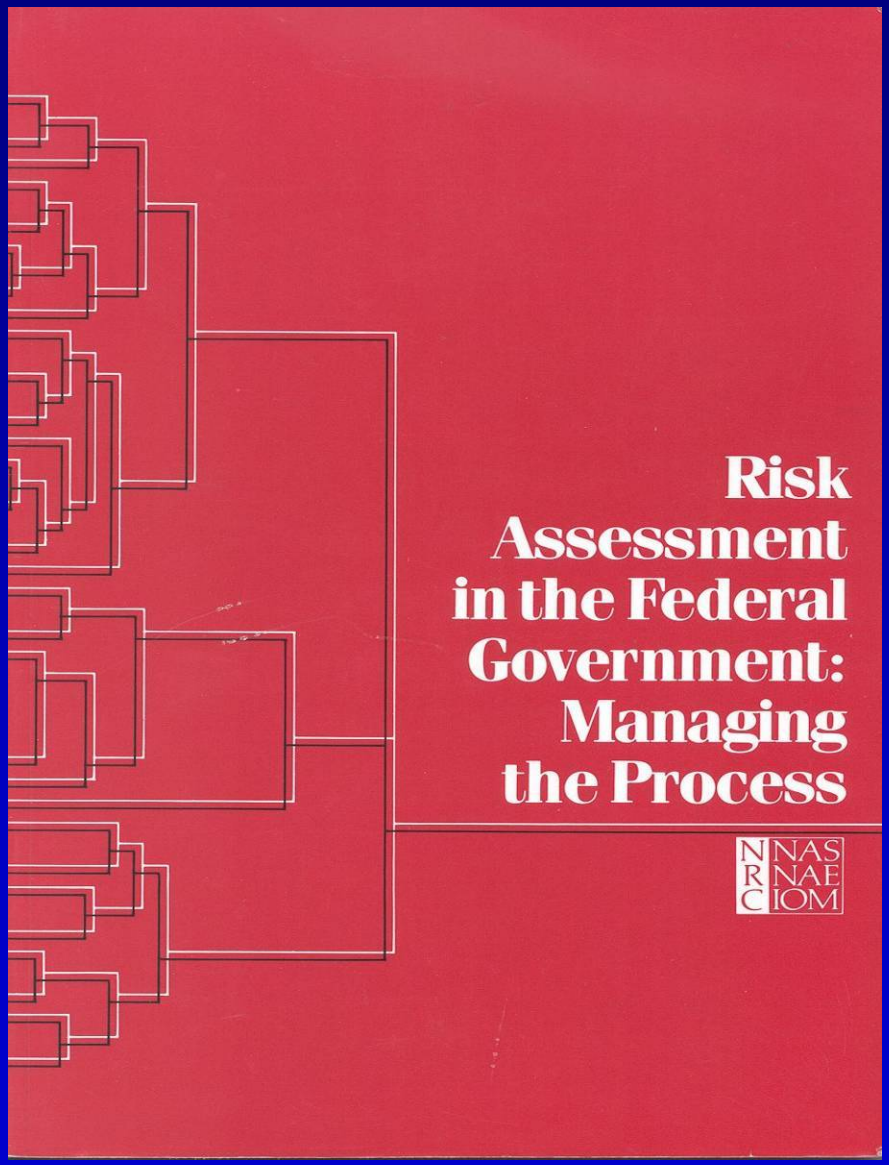
From Knowledge to Policy: The Five-Step Method

1. Is _____ a carcinogen?
2. How risky is _____?
3. How are people exposed to _____?
4. How can exposure to _____ be prevented?
5. How will the policy be evaluated?

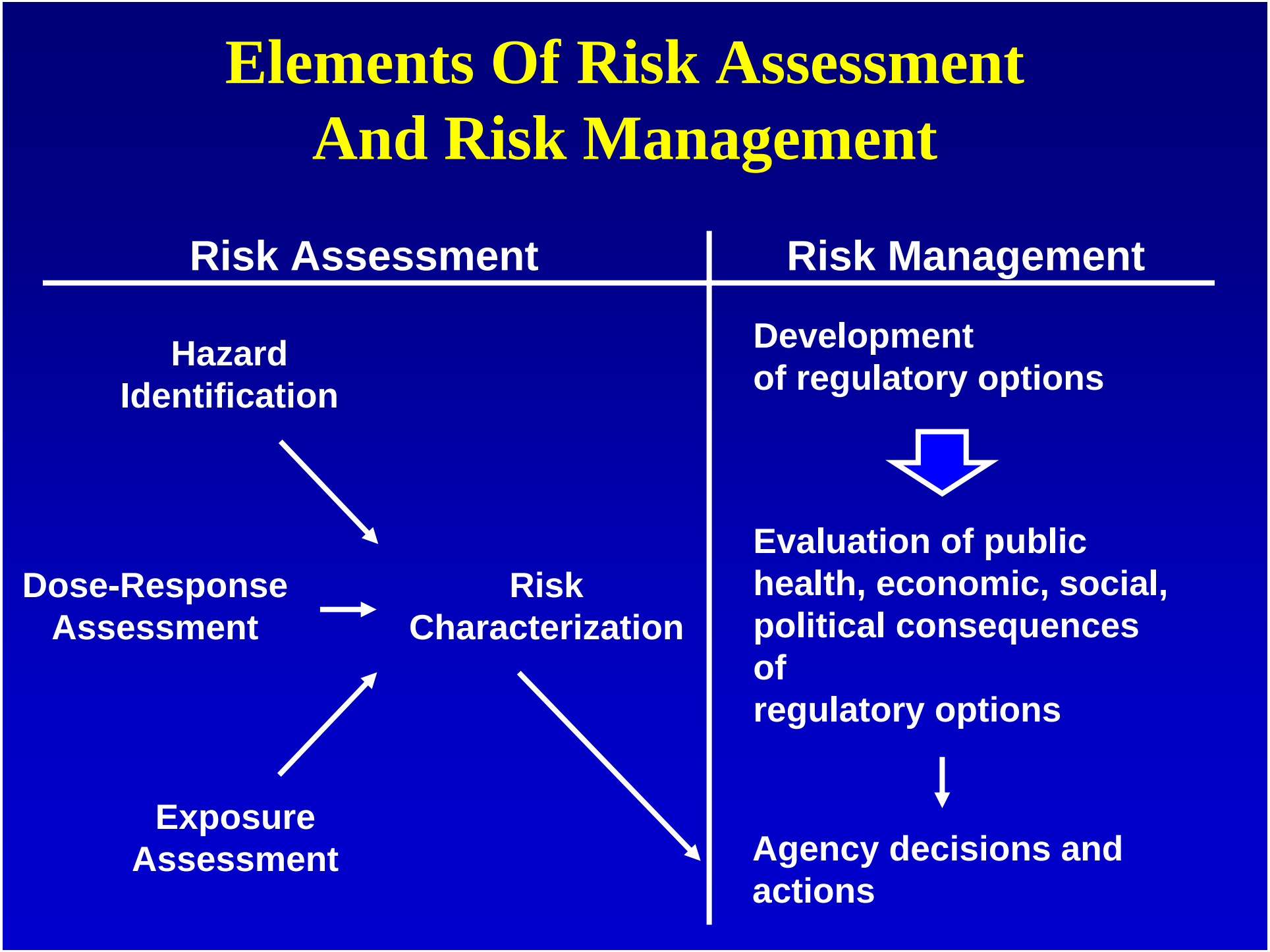
Informing Decisions About Risk

- Risk assessment does not provide answers, but is an essential component of informed decisions about risks.
- Risk assessment is a useful way for organizing what is known and not known for the purpose of risk communication

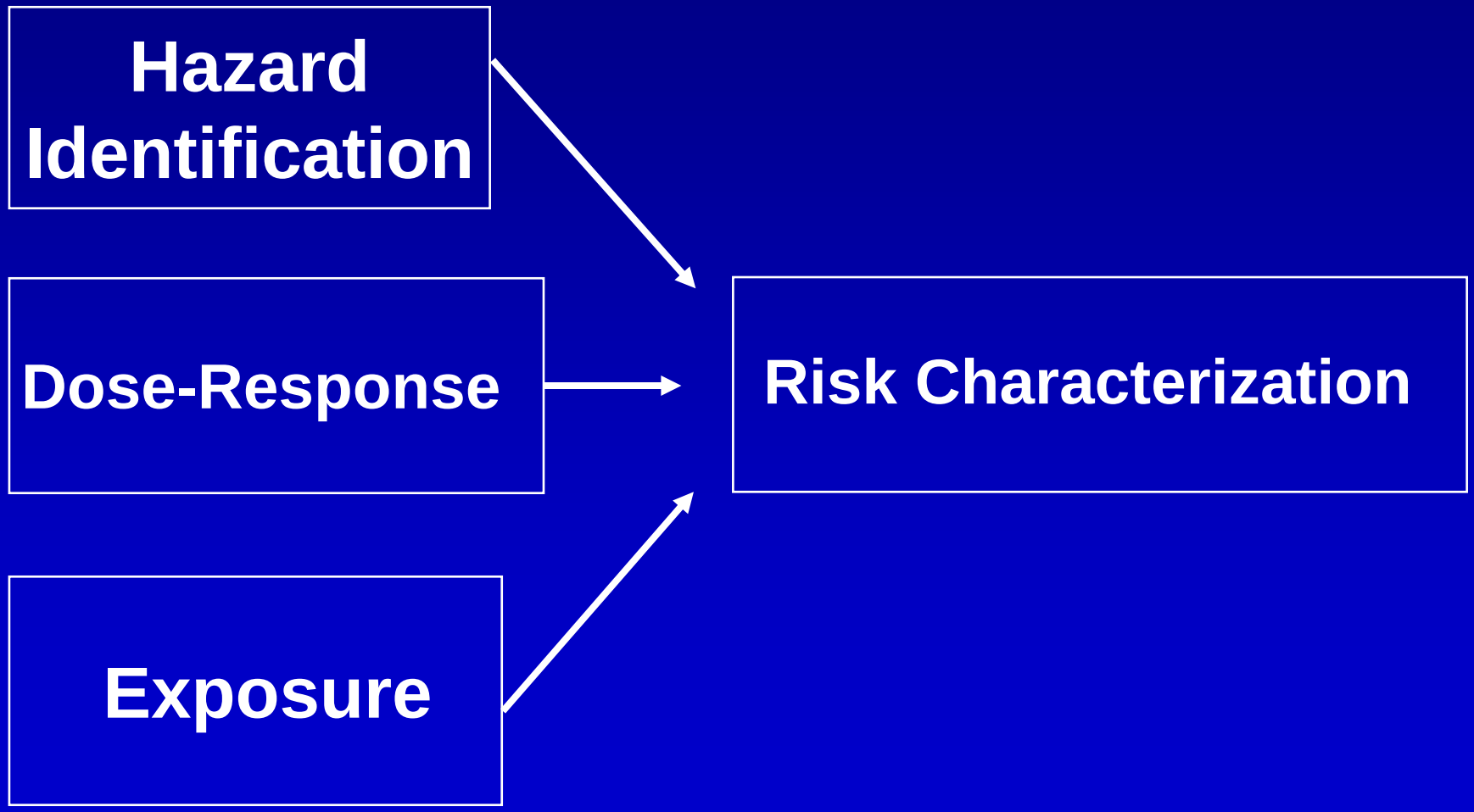
The “Red Book”


Risk
Assessment
in the Federal
Government:
Managing
the Process
NRC
NAS
NAE
IOM

Elements Of Risk Assessment And Risk Management



The Four Components of QRA



Four Steps of Risk Assessment

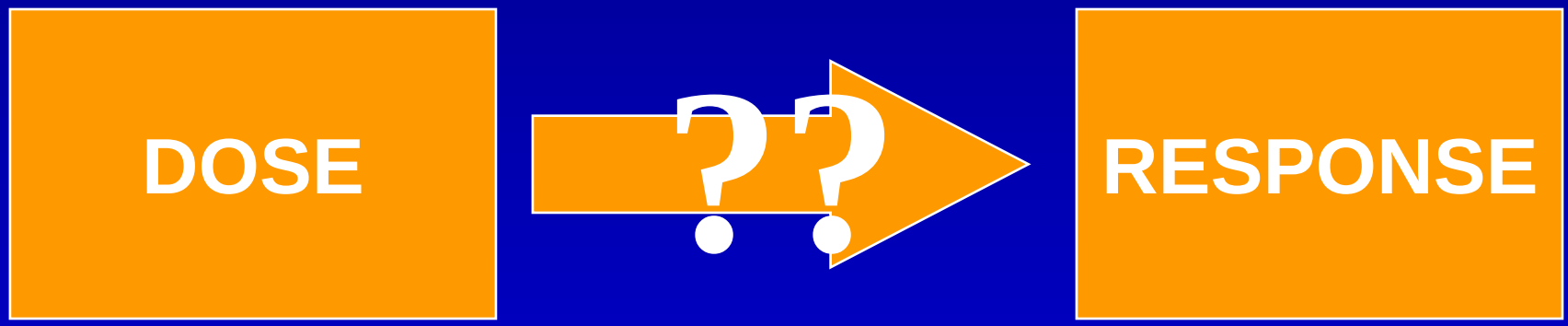
- Hazard Identification
- Dose Response
- Exposure Assessment
- Risk Characterization

Component 1:
Hazard Identification

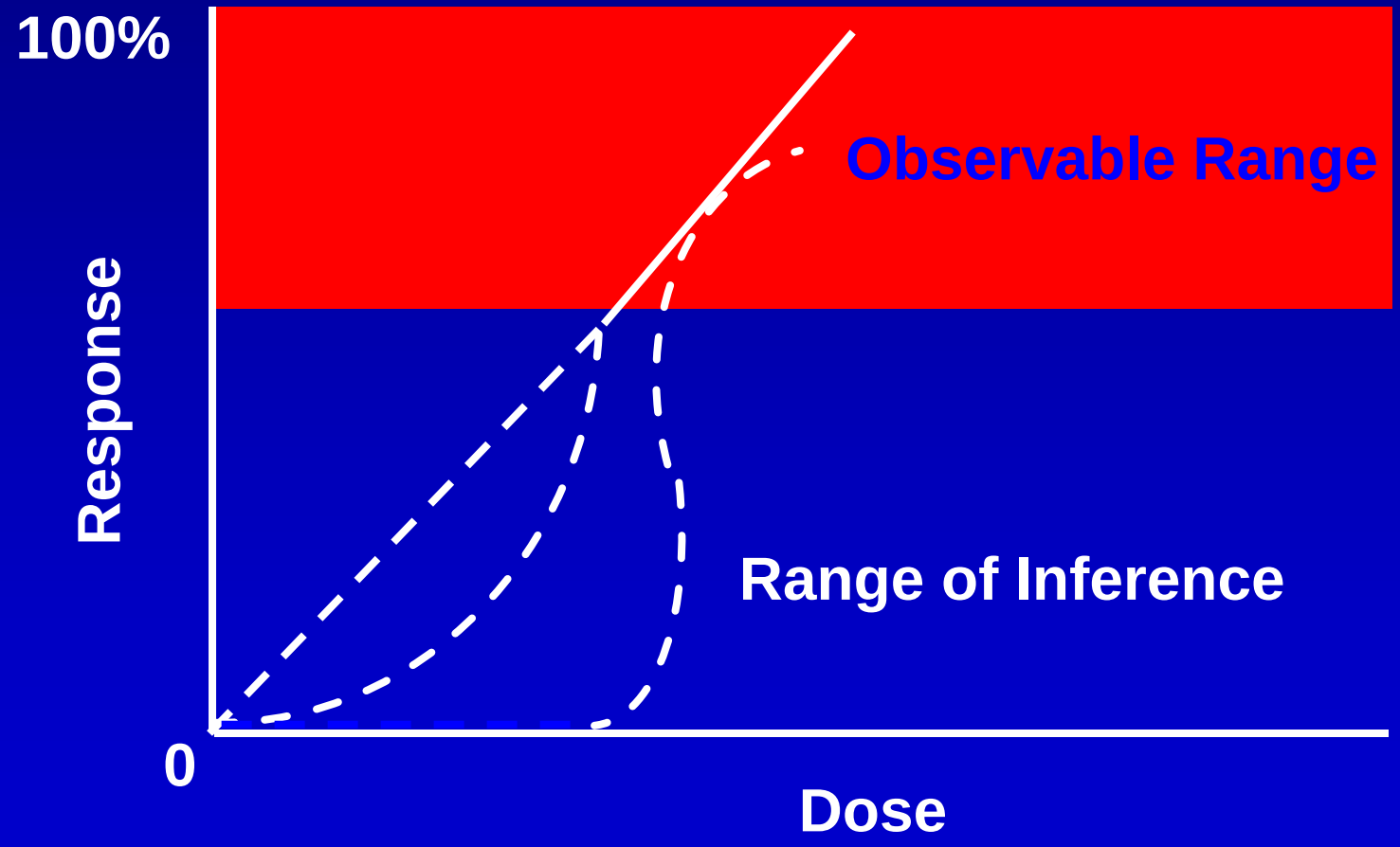
Hazard Identification

- Review and analyze toxicity data
- Weigh the evidence that a substance causes various toxic effects
- Evaluate whether toxic effects in one setting will occur in other settings

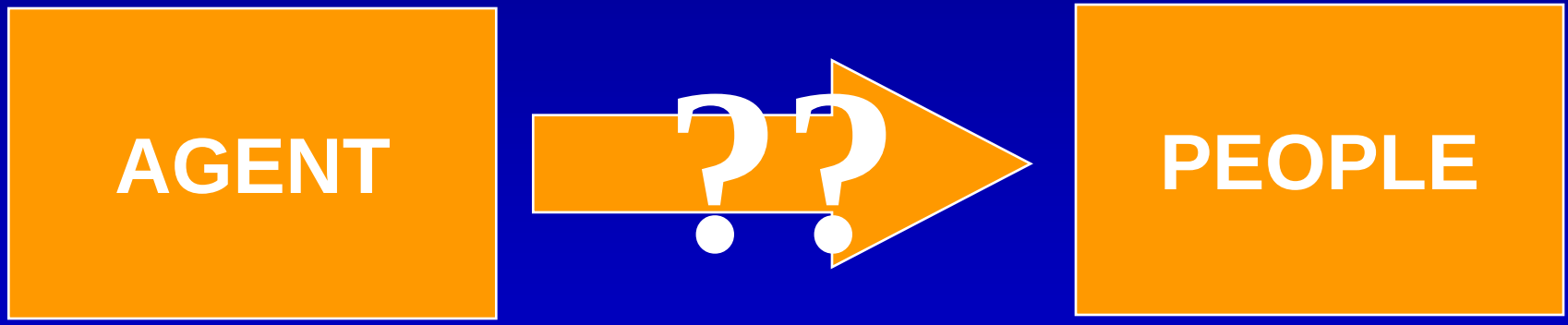
Component 2:
Dose-Response Assessment



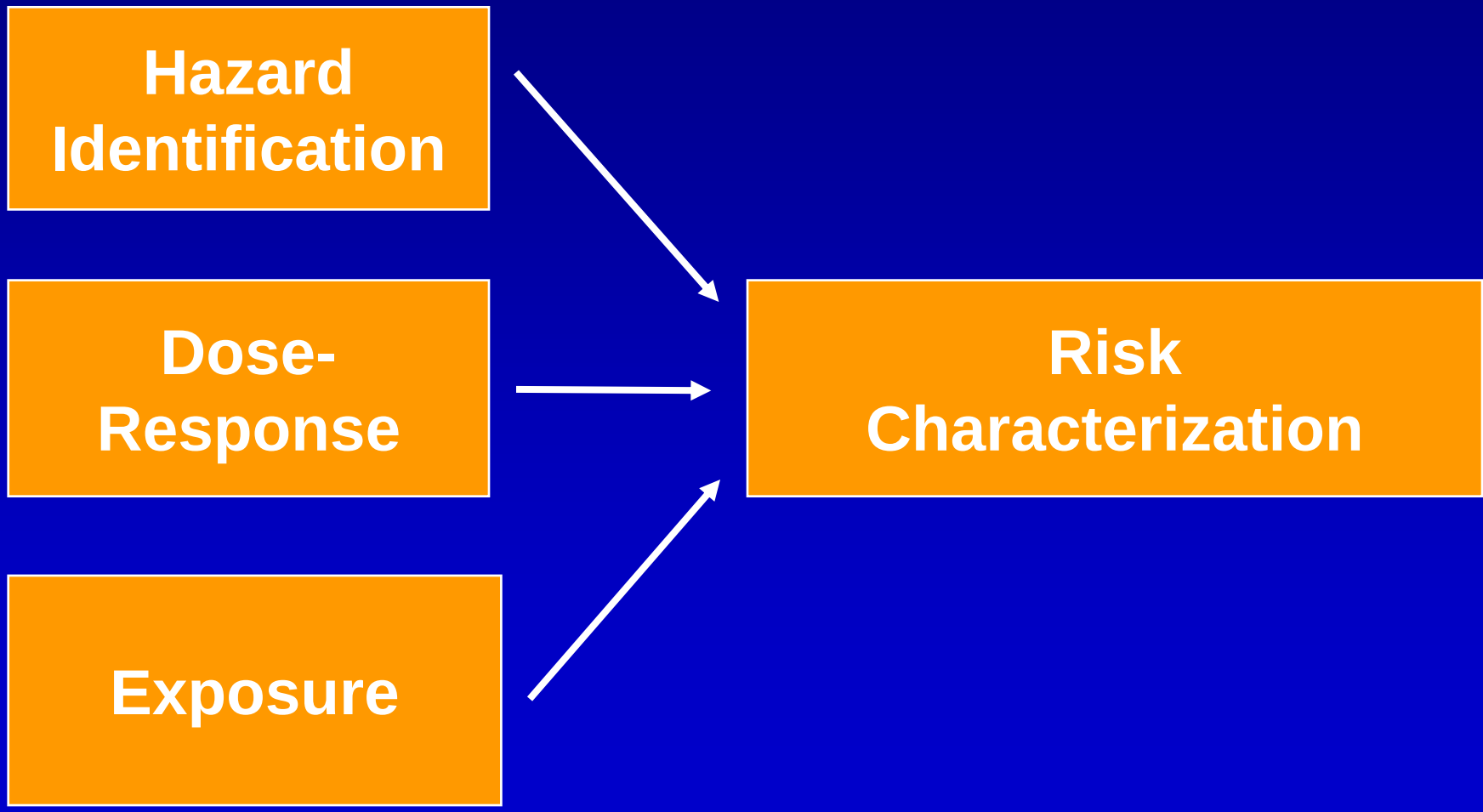
Dose-Response Curve



Component 3:
Exposure Assessment



Component 4:
Risk Characterization



Risk Characterization

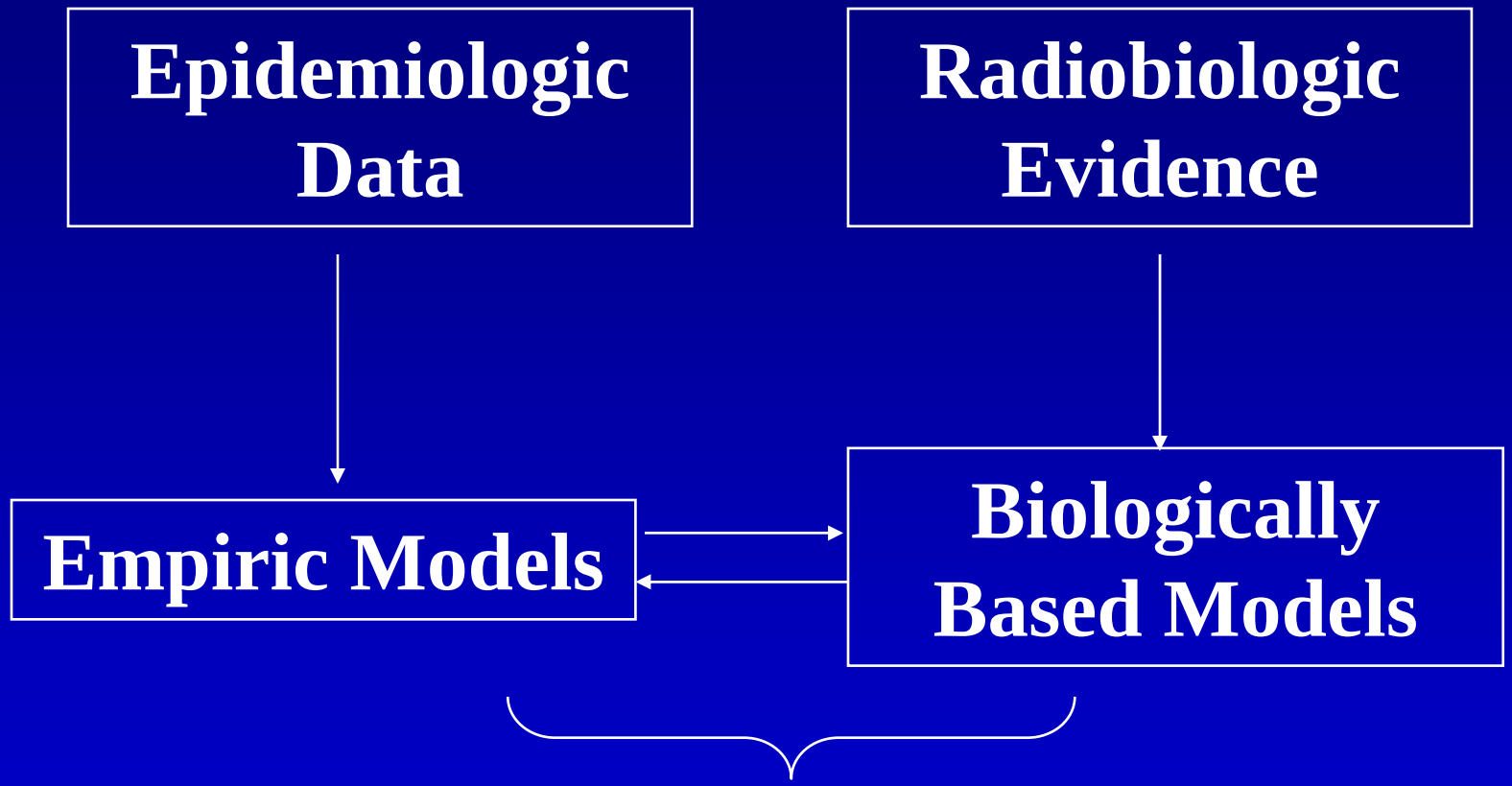
- Integrate and summarize the hazard identification, dose-response assessment, and exposure assessment
- Develop public health risk estimates
- Develop a framework to define the significance of the risk
- Present assumptions, uncertainties, scientific judgments

Uncertainty: Always A Problem

"Uncertainty can be defined as a lack of precise knowledge as to what the truth is, whether qualitative or quantitative." (NAS, 1994)

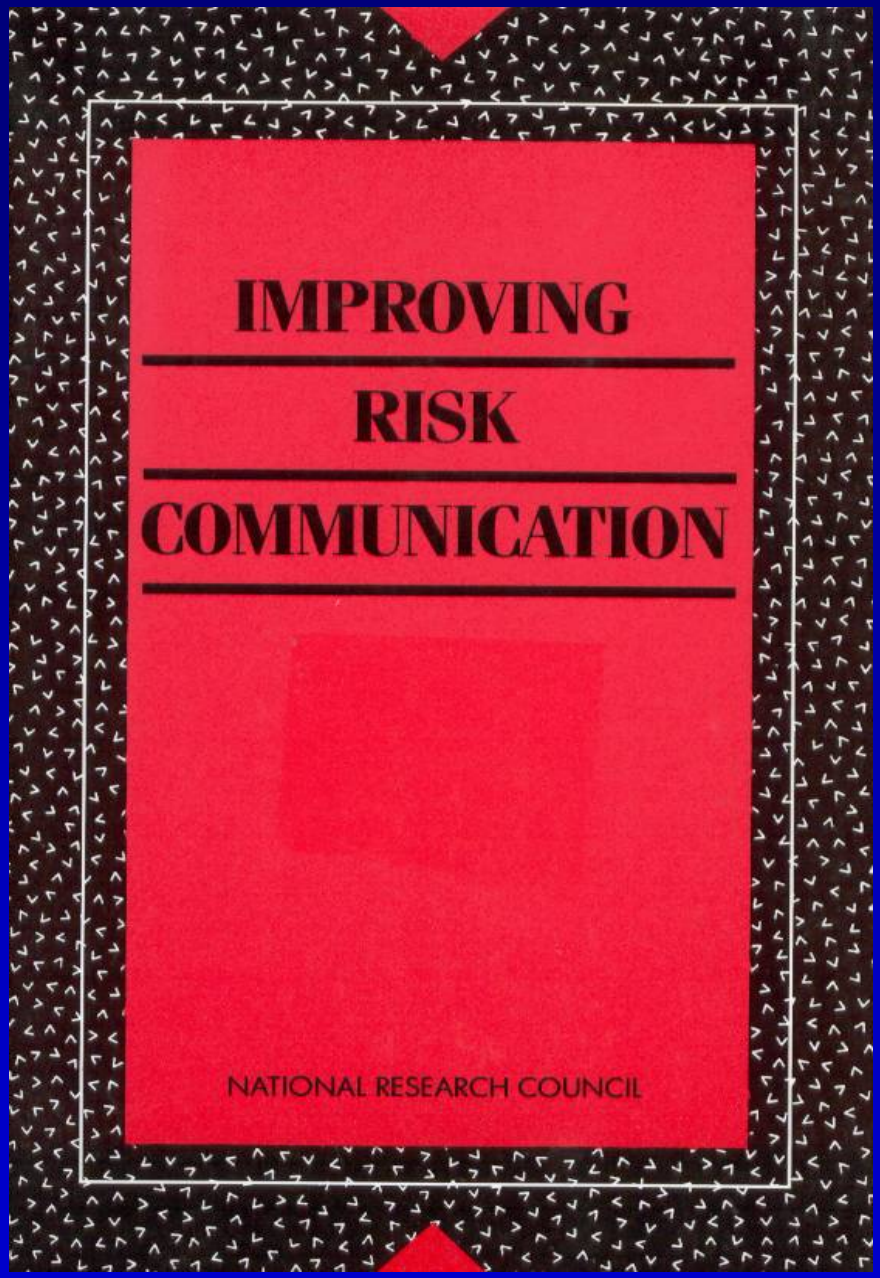
"To know one's ignorance is the best part of knowledge." (The Tao, No. 71).

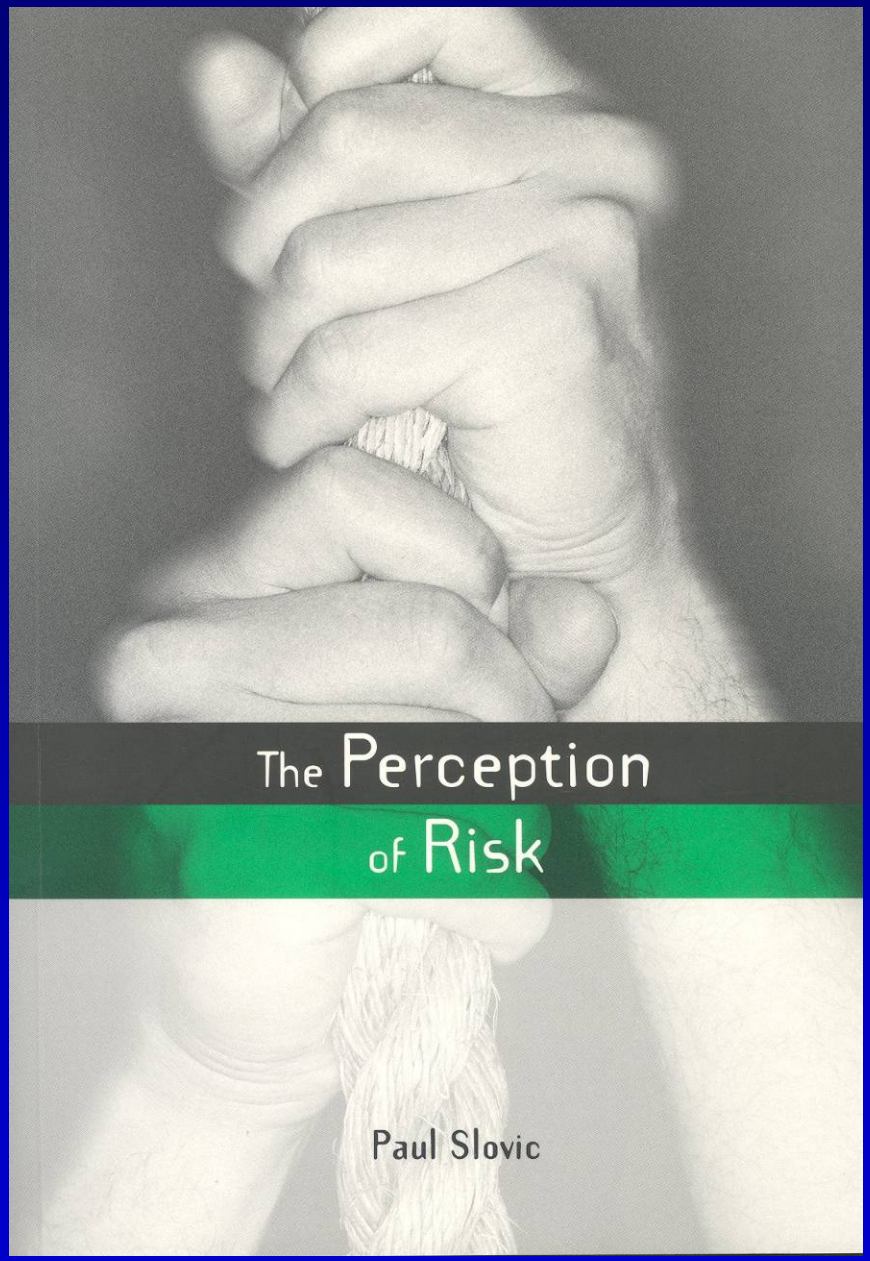
Characterizing Radiation Risks



Issues in Radiation Risk Communication

- What are the element of the risk characterization?
- What is the level of certainty?
- What is the level of risk for individuals?
- With what certainty can risk be predicted?
- What is the level of risk for populations?
- With what certainty can risk be estimated?


IMPROVING
RISK
COMMUNICATION
NATIONAL RESEARCH COUNCIL


The Perception
of Risk
Paul Slovic

Risk Communication

"Risk communication is an interactive process of exchange of information and opinion among individuals, groups, and institutions. It involves multiple messages about the nature of risk and other messages, not strictly about risk, that express concerns, opinions, or reactions to risk messages or to legal and institutional arrangements for risk management."

National Research Council. 1989.Improving Risk Communication. Washington, D.C.: National Academy Press.

Source: http://www.riskworld.com/

Source: http://www.atsdr.cdc.gov/HEC/primer.html

Twenty Years of Risk Communication
Progress or Process?

- ***First Stage***

  All we have to do is get the number right
- ***Second Stage***

  All we have to do is tell them the numbers
- ***Third Stage***

  All we have to do is explain what we mean by the numbers
- ***Fourth Stage***

  All we have to do is show them they've accepted similar risks in the past

Source: Fischhoff B. Risk Anal. 1995 Apr;15(2):137-45.

Twenty Years of Risk Communication
Progress or Process?

- ***Fifth Stage***

  All we have to do is show them it's a good deal for them
- ***Sixth Stage***

  All we have to do is treat them nice
- ***Seventh Stage***

  All we have to do is make them partners

Source: Fischhoff B. Risk Anal. 1995 Apr;15(2):137-45.

Dimensions of Risk and Their Effects on Risk Perception

Dimension	Conditions Associated with Higher Perceived Risk	Conditions Associated with Lower Perceived Risk
Severity of Consequences	Large numbers of fatalities or injuries per event	Small numbers of fatalities or injuries per event
Probability of Occurrence	High probability of occurrence	Low probability of occurrence
Catastrophic Potential	Fatalities or injuries grouped in time and space	Fatalities or injuries distributed randomly in time and space
Reversibility	Irreversible	Consequences appear reversible
Latency of Effects	Chronic effects that are delayed in time	Acute effects immediately realized

Adapted from Cohrssen JJ and Covello VT. 1989. Risk Analysis: A Guide to Principles and Methods for Analyzing Health and Environmental Risks. US Council on Environmental Quality.

Dimensions of Risk and Their Effects on Risk Perception

Dimension	Conditions Associated with Higher Perceived Risk	Conditions Associated with Lower Perceived Risk
Impact on Future Generations	Risks borne equally or greater by future generations	Risks borne primarily by current generation
Victim Identity	Identifiable victim	Statistical victims
Familiarity	Unfamiliar risks	Familiar risks
Understanding	Lack of personal understanding of mechanisms or processes involved	Personal understanding of mechanisms or processes involved

Adapted from Cohrssen JJ and Covello VT. 1989. Risk Analysis: A Guide to Principles and Methods for Analyzing Health and Environmental Risks. US Council on Environmental Quality.

Dimensions of Risk and Their Effect on Risk Perception

Dimension	Conditions Associated with Higher Perceived Risk	Conditions Associated with Lower Perceived Risk
Scientific Uncertainty	Risks unclear to scientists	Risks relatively well-known to scientists
Dread	Risks evoke fear, terror, or anxiety	Risks not dreaded
Voluntariness	Involuntary exposures	Risks taken at one's own choice
Controllability	Little personal control over risk	Some personal control over risk
Clarity of Benefits	Benefits from activity generating risk questioned	Clear benefits

Adapted from Cohrssen JJ and Covello VT. 1989. Risk Analysis: A Guide to Principles and Methods for Analyzing Health and Environmental Risks. US Council on Environmental Quality.

Dimensions of Risk and Their Effects on Risk Perception

Dimension	Conditions Associated with Higher Perceived Risk	Conditions Associated with Lower Perceived Risk
Equity	No direct benefit for those at risk from an activity	Seemingly equitable distribution of risks and benefits
Institutional Trust	Lack of trust in institutions responsible for risk management	Responsible institutions well- trusted
Personal Stake	Individual personally at risk	Individual not personally at risk
Attribution of Blame	Risk caused by human failure	Risk caused by nature
Media Attention	Much media attention	Little media attention

Adapted from Cohrssen JJ and Covello VT. 1989. Risk Analysis: A Guide to Principles and Methods for Analyzing Health and Environmental Risks. US Council on Environmental Quality.

RISK = HAZARD PLUS OUTRAGE

What About Radiation Risks?

Severity:	**small → large**
Probability:	**low → high**
Catastrophe:	**possible**
Reversible:	**no**
Latency:	**short/long**
Uncertainty:	**little**

What About Radiation Risks?

Benefits:	**yes (understood??)**
Controllable:	**yes and no**
Familiarity:	**some**
Impact on future:	**seen as “yes”**

Successful Risk Communication

Messages about expert knowledge are necessary to the risk communication process; they are not sufficient, however, for a message to be successful.

National Research Council. 1989. Improving Risk Communication. Washington, D.C.: National Academy Press.

Good Risk Communication

Good risk communication may not always improve a situation. However, poor risk communication will almost always make a situation worse.

National Research Council. 1989.Improving Risk Communication. Washington, D.C.: National Academy Press.

Successful Risk Communication

- **Does not always lead to better decisions**
- **Need not result in consensus or uniform behavior**

National Research Council. 1989. Improving Risk Communication. Washington, D.C.: National Academy Press.

Risk Messages vs. Risk Communication

Risk Messages include

- one-way messages
- verbal statements
- pictures
- advertisements
- publications
- legal briefs
- warning signs
- other declaratory activities

Risk Communication includes

- two-way messages
- dialogue
- announcements/warnings
- reactions
- perceptions
- personal beliefs

Successful Risk Communication

Raises the level of understanding and satisfies those involved that they are adequately informed within the limits of available knowledge.

National Research Council. 1989. Improving Risk Communication. Washington, D.C.: National Academy Press.

Comparisons in Risk Communication

- When lay and expert values differ, reducing different kinds of hazard to a common metric (such as number of fatalities per year) and presenting comparisons only on that metric have great potential to produce misunderstanding and conflict and to engender mistrust of expertise

National Research Council. 1989.Improving Risk Communication. Washington, D.C.: National Academy Press.

Comparative Risk

- Use other, familiar risks to place new risk in a context
- Comparisons often made to known risks—motor vehicle accidents, airplane travel
- Comparison may be artificial—e.g., voluntary vs. involuntary risk
- Comparison may trivialize the new risk

7 Cardinal Rules

- **Rule 1 - Accept and involve the public as a legitimate partner**
- **Rule 2 - Plan carefully and evaluate performance**
- **Rule 3 - Listen to your audience**
- **Rule 4 - Be honest, frank, and open**
- **Rule 5 - Coordinate and collaborate with other credible sources**
- **Rule 6 - Meet the needs of the media**
- **Rule 7 - Speak clearly and with compassion**

The Seven Realities of Risk Communications

- Involuntary risks are unacceptable
- Once minds are made up, it's hard to change them
- Trust and credibility require long-term effort
- Unfamiliarity breeds contempt
- Health risks may be secondary in environmental controversy
- Community values/beliefs/ perceptions can outweigh science in shaping public policy
- The best communication can't reverse bad risk management decisions

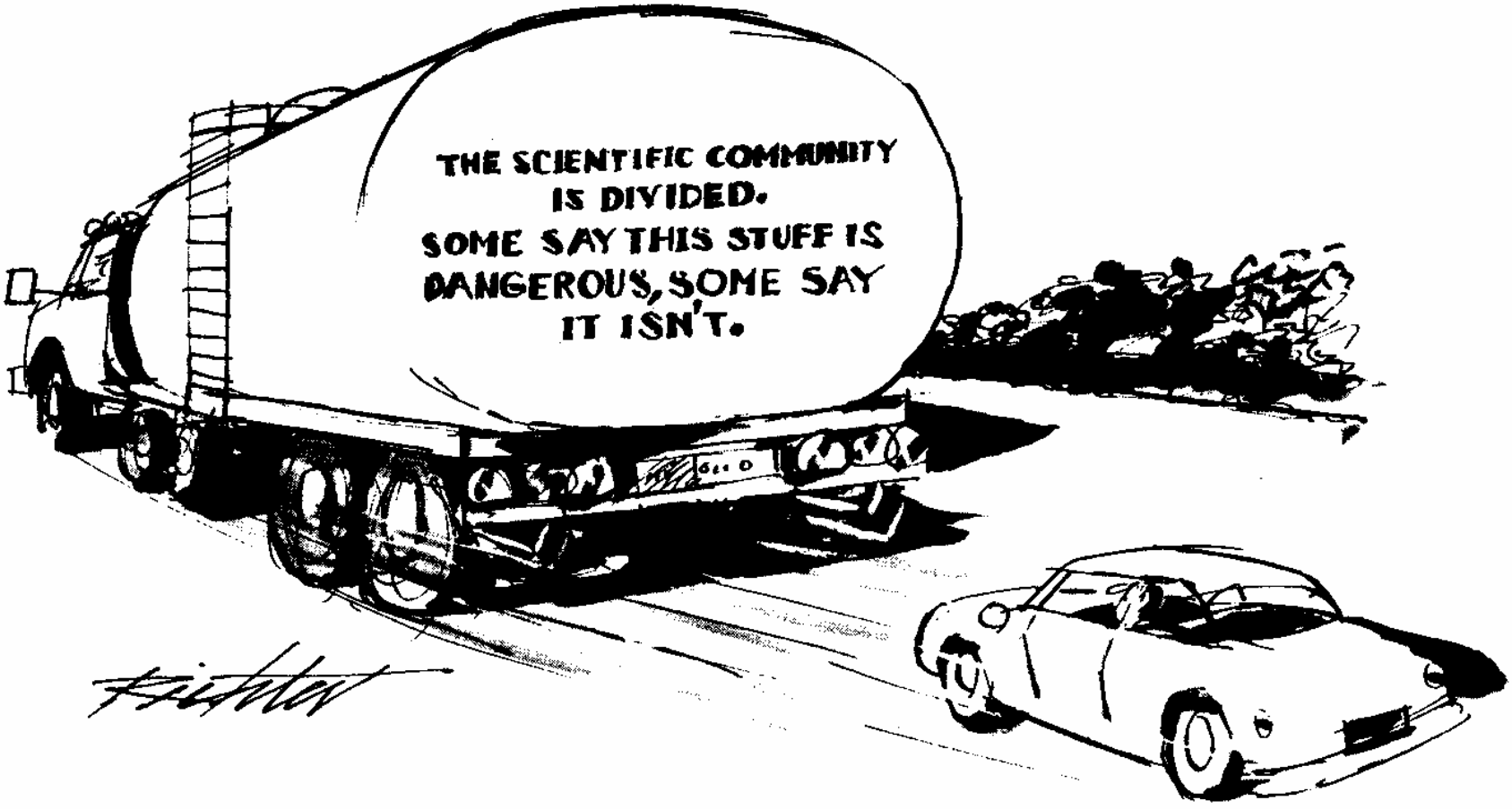


FIGURE 2.2 SOURCE: Drawing by Richter; ©1988 The New Yorker Magazine, Inc.

Some Confusing Terms

- Uncertainty
- Error
- Sensitivity
- Variability
- Risk
- Probability

Communicating Uncertainty

- Statistical descriptors
  - Confidence intervals
- Quantitative characterization
  - Distribution-based approaches
- Qualitative description
  - Adjectival characterization
  - Weight of evidence

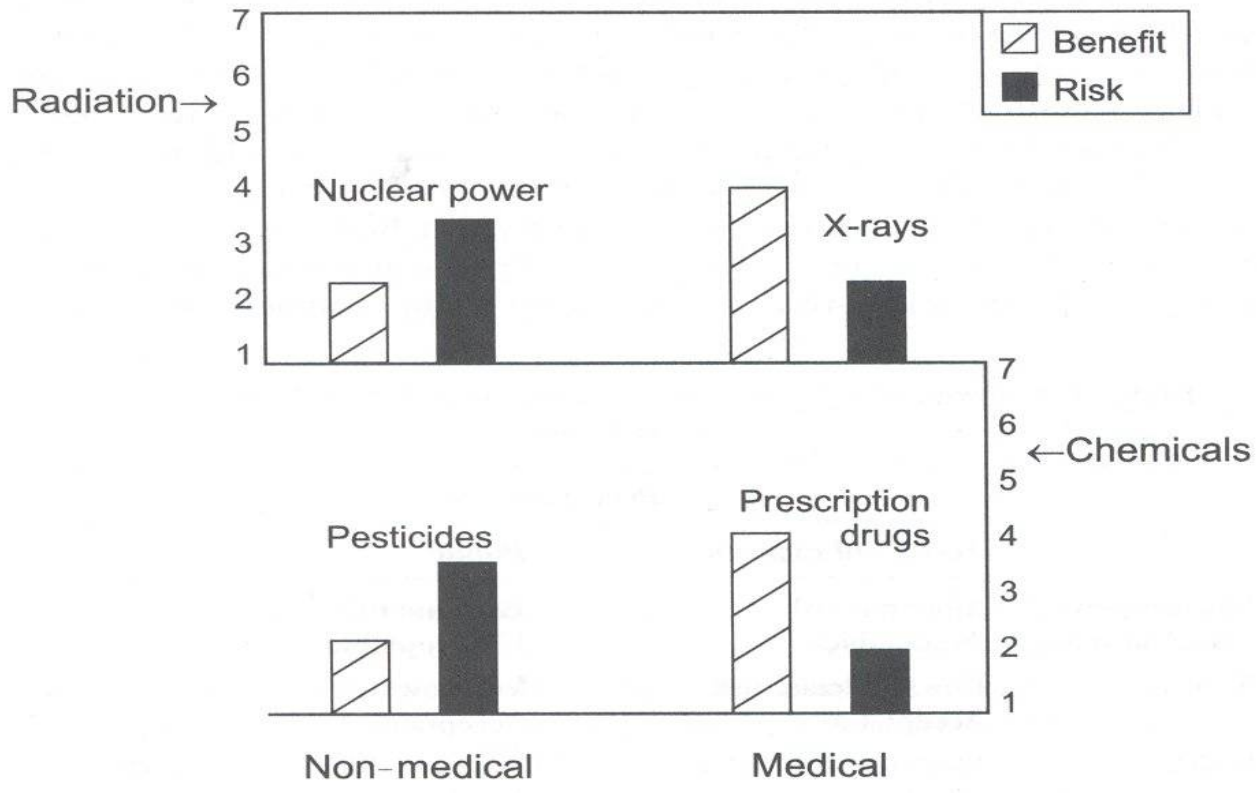
How And When Do Scientists Communicate Radiation Risks?

- In reporting findings of individual studies
- In communicating findings of risk assessments
- As experts: consultants, advocates, testifying, public resource
- As policy-makers and risk communicators

Table 16.1 *Summary of Perception and Acceptance of Risks from Diverse Sources of Radiation Exposure*

	Perceived risk	
	Technical experts	***Public***
Nuclear power/ nuclear waste	Moderate risk Acceptable	Extreme risk Unacceptable
X-rays	Low/moderate risk Acceptable	Very low risk Acceptable
Radon	Moderate risk Needs action	Very low risk Apathy
Nuclear weapons	Moderate to extreme risk Tolerance	Extreme risk Tolerance
Food irradiation	Low risk Acceptable	Moderate to high risk Acceptability questioned
Electric and magnetic fields	Low risk Acceptable	Significant concerns developing Acceptability questioned

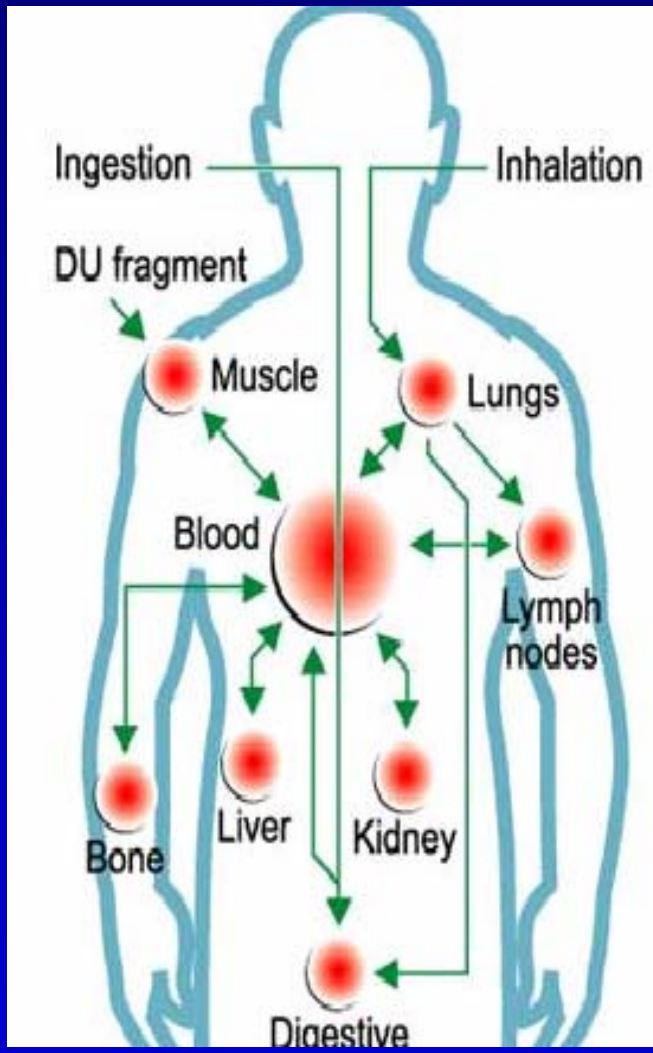
Source: Slovic, The Perception of Risk , Earthscan 2000



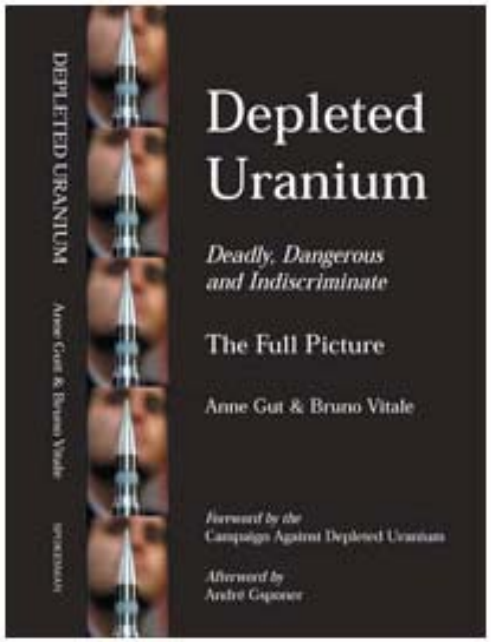
Note that medical sources of exposure have more favorable benefit/risk ratings.
Source: Data are from a national survey in Canada by Slovic, Kraus et al (1991).

Figure 16.1 *Mean perceived risk and perceived benefit for non-medical and medical sources of exposure to radiation and chemicals. (Each item was rated on two scales: perceived risk, ranging from 1 to 7 (very low to very high risk) and perceived benefit, ranging from 1 to 7 (very low to very high benefit))*

Source: Slovic, The Perception of Risk , Earthscan 2000



NEW BOOK ON DEPLETED URANIUM NOW AVAILABLE



Have we been DUP'd to think Depleted Uranium Penetrators (DUPs) are acceptable weapons of war?

SSG Chris Kornkven and soldiers unaware of dangers of depleted uranium dust, climbing on destroyed Iraqi tank.

Source: http://www.miltoxproj.org/DU/dupd.htm

Depleted Uranium Penetrators: IOM Conclusions

- ***Lung cancer:*** **The committee concludes that there is limited/suggestive evidence of no association between exposure to uranium and lung cancer at cumulative internal dose levels lower than 200 mSv or 25 cGy. However, there is inadequate/insufficient evidence to determine whether an association does or does not exist between exposure to uranium and lung cancer at higher levels of cumulative exposure.**

Source: Institute of Medicine. Gulf War and Health: Vo. 1. Depleted Uranium, Pyridostigmine Bromide, Sarin, and Vaccines. 2001

Depleted Uranium Penetrators: IOM Conclusions, continued

- ***Renal function*: The committee concludes that there is limited/suggestive evidence of no association between exposure to uranium and clinically significant renal dysfunction.**
- ***Other health outcomes*: The committee concludes that there is inadequate/insufficient evidence to determine whether an association does or does not exist between exposure to uranium and the following health outcomes: lymphatic cancer; bone cancer; nervous system disease; nonmalignant respiratory disease; or other health outcomes….**

Source: Institute of Medicine. Gulf War and Health: Vo. 1. Depleted Uranium, Pyridostigmine Bromide, Sarin, and Vaccines. 2001

Players in Radiation Risk Assessment and Communication

Organizations	ICRP NCRP NAS/NRC UN
Committees	UNSCEAR BEIR NCRP ICRP
Agencies	EPA NRC FDA DOE

Radon and Lung Cancer Indoor Radon: Colorless, Odorless Killer?

- Radon ubiquitous indoors
- Concentrations log normal
- Some homes have levels as high as miners
- Majority of time spent at home

- You can immediately save time and trouble!
- You can rescue your home sale or purchase!
- You can avoid wasting a fortune!
- You can dramatically reduce your health worries.
- You might even save a life.

Dear Friend:

If you'd like to **completely rid yourself of Radon worries**, learn **exactly what the risks are**, how to **reduce them**, and **avoid being taken advantage of** by unscrupulous contractors, then this may be the most important web site you ever landed on!

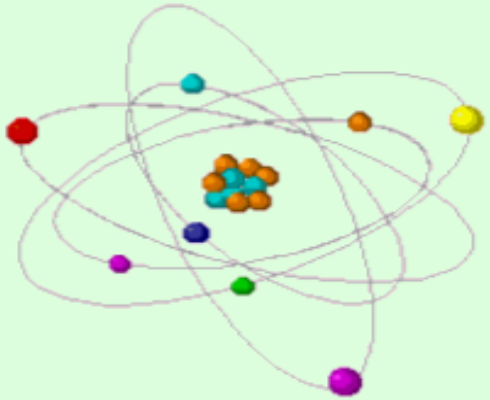
Why? Because when you're alerted that you may have a problem with dangerous radon gas (a silent killer), **you need a quick education, or you may find yourself at the mercy of professionals who could take advantage of your Radon panic.**

Yes, It's A Fact That Radon kills!

According to the American Cancer Society, radon is the second leading cause of lung cancer in the United States and is associated with 15,000 to 22,000 lung cancer deaths each year.

http://www.radonsecrets.com/

Protect Your Loved Ones: Use the Radon Home Test Kit Recommended by All Major Health Organizations!

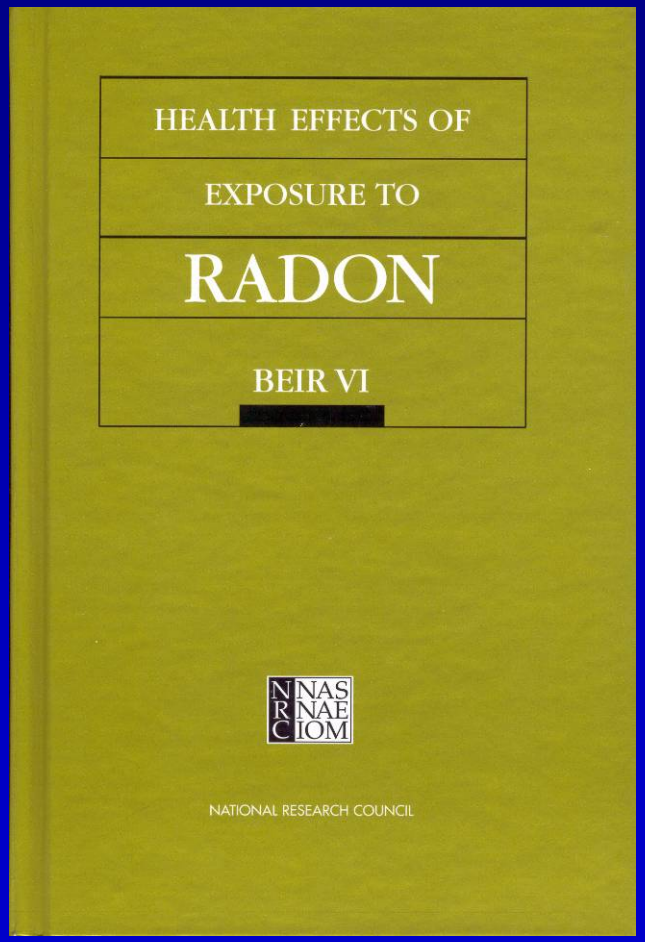


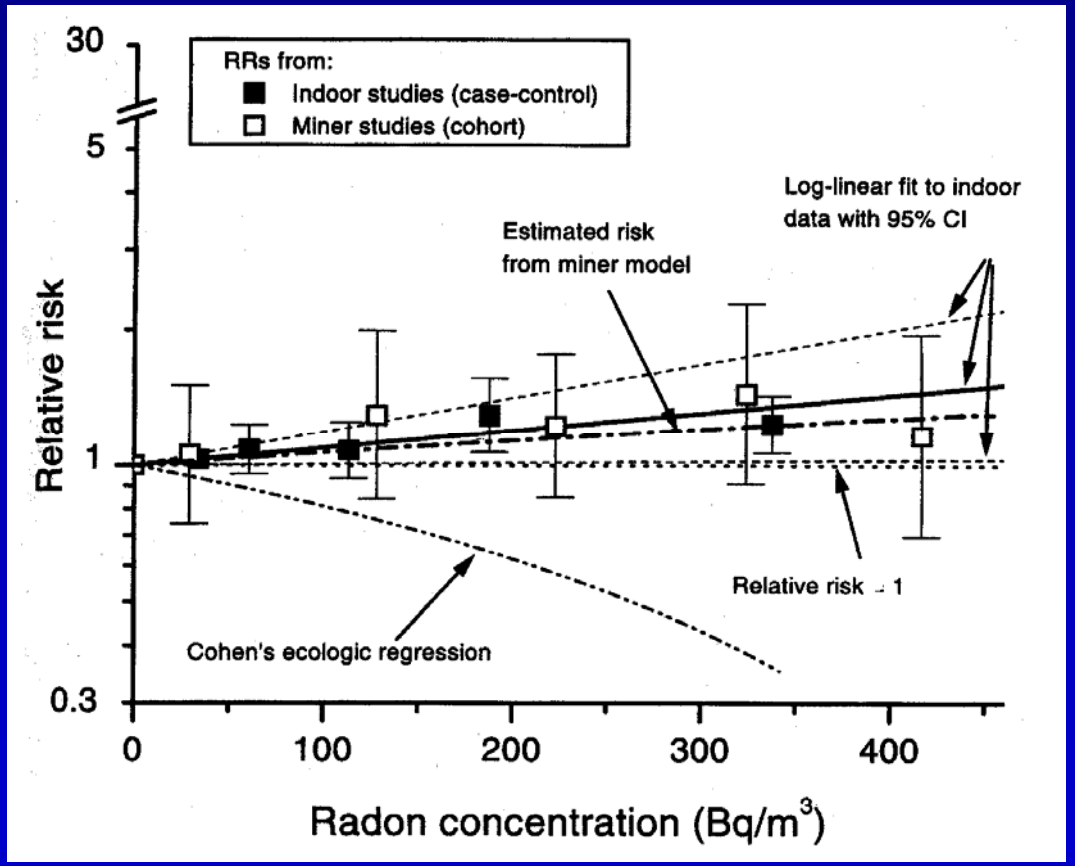
The Do-It-Yourself Home Radon Test Kit

- Incredibly Simple to Use
- The U.S.'s top-rated & most trusted home kit
- VERY economical - Just $9.95 each!
- Contains everything for a 3-7 day radon test
- Perform simple test and mail it in ... you'll then be able to access your home's results online!

http://www.sixwise.com/pages/products/radon/faq.htm

BEIR VI: Assessing Radon's Risks





4 Components of Risk Assessment

- Hazard Identification
- Dose Response
- Exposure Assessment
- Risk Characterization

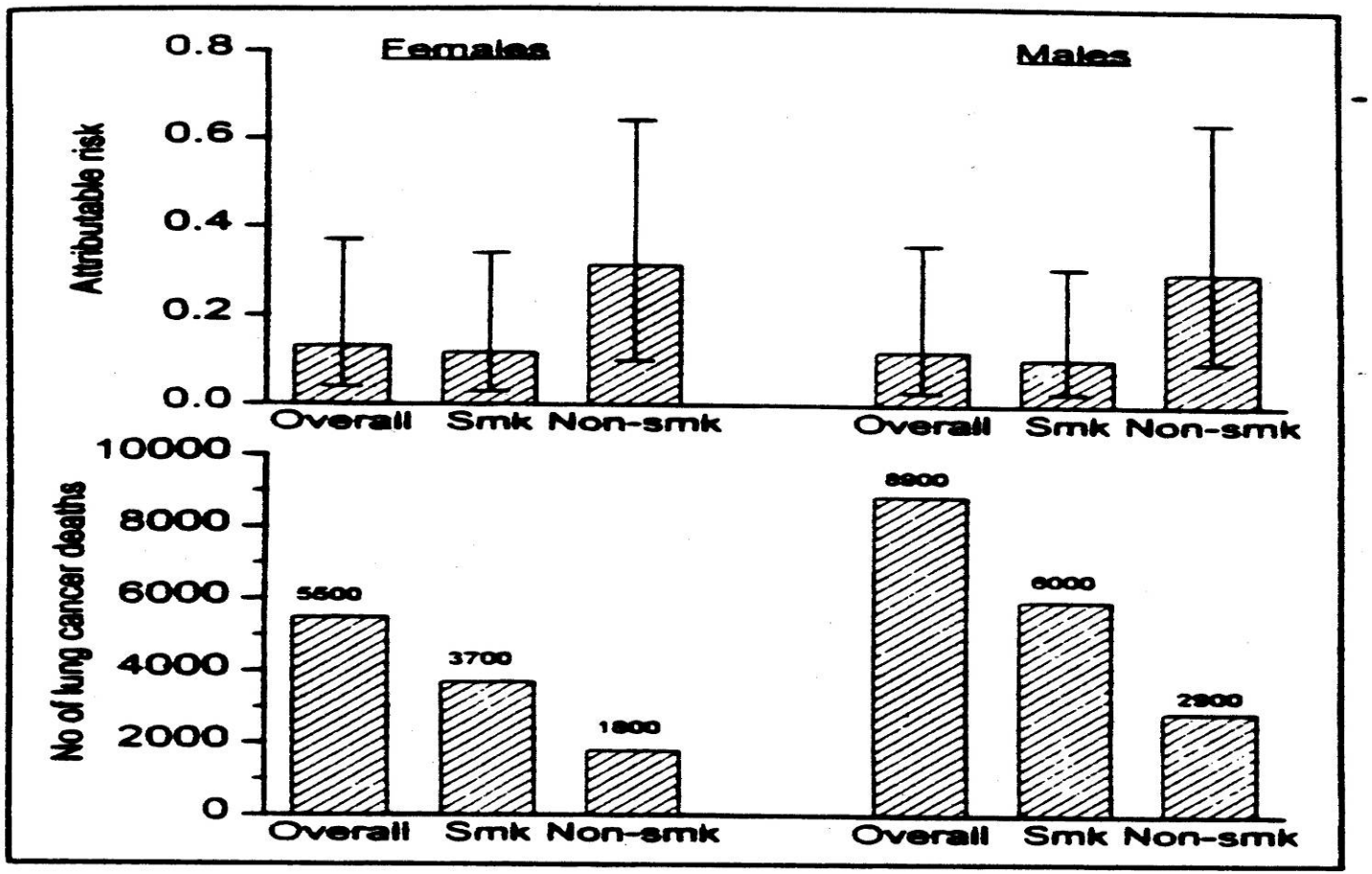
Radon Risk Characterization

		Attributable to Rn progeny exposure	
	Lung Cancer Deaths	Number[a]	Number[b]
Males			
Total	65,100	7,800	8,900
Smokers	55,300	6,600	6,000
Never-Smokers	9,800	1,200	2,900
Females			
Total	39,200	4,700	5,500
Smokers	33,300	4,000	3,700
Never-Smokers	5,900	700	1,800

[a] Estimates based on applying same risk model to smokers and never-smokers, implying joint multiplicative relationship for Rn progeny exposure and smoking.

[b] Estimates based on applying a smoking adjustment to risk models, multiplying the baseline ERR/WLM by 0.9 for smokers and 3.0 for never-smokers.

Attributable Lung Cancer Deaths



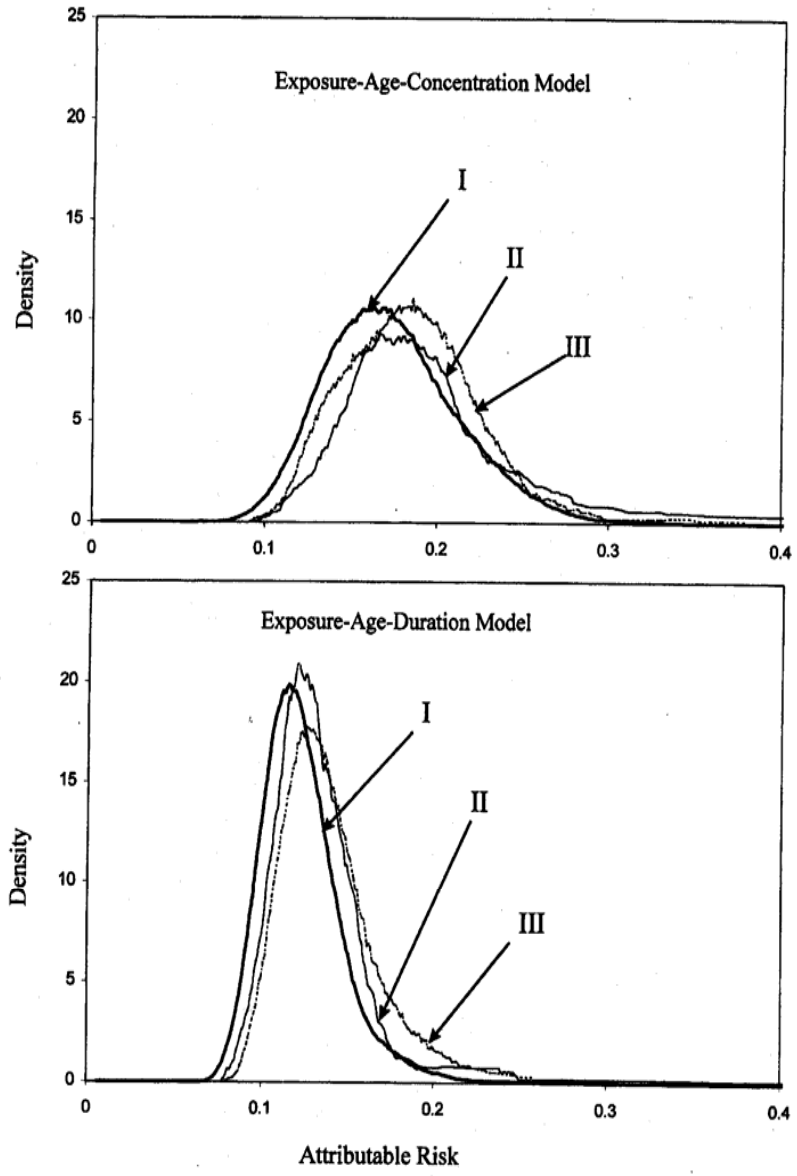
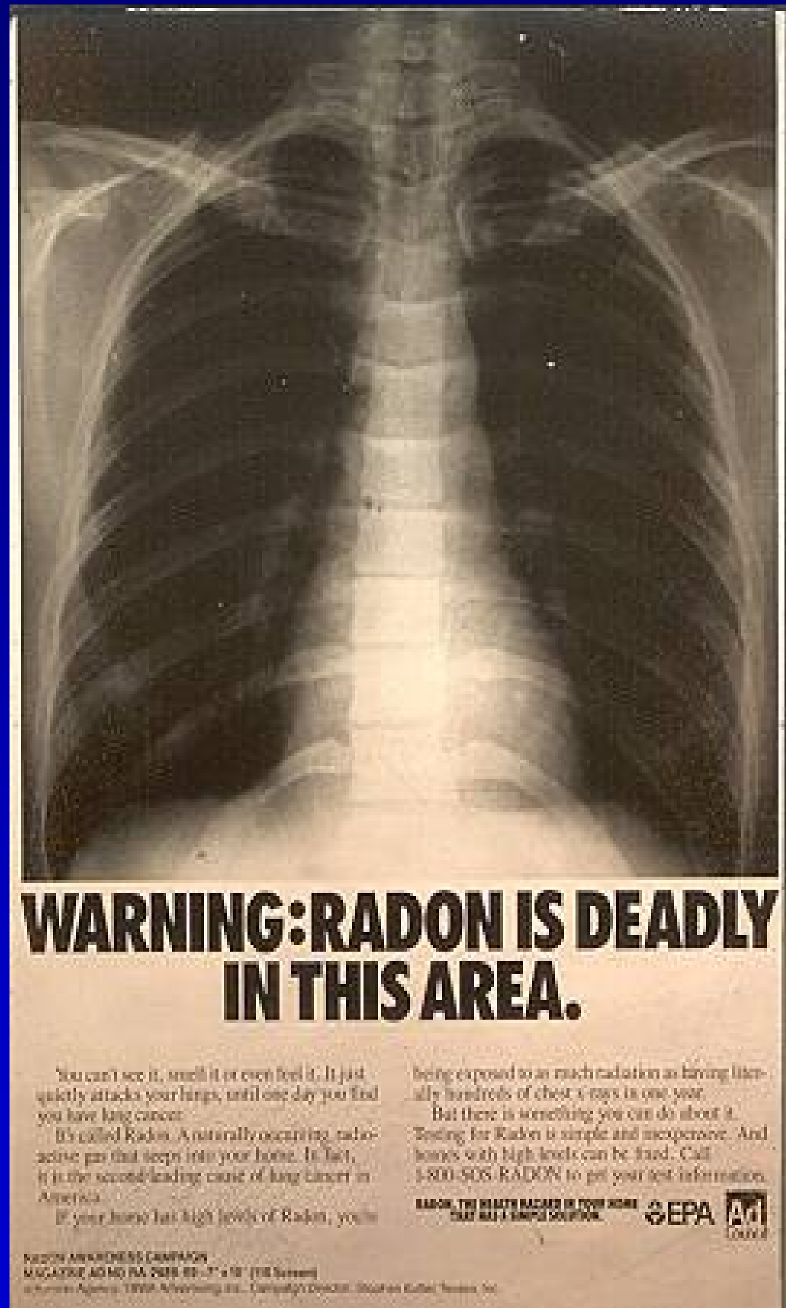


FIGURE 3-3b Uncertainty distributions for the population attributable risk (AR) for females. I: uncertainty in model parameters. II: uncertainty in model parameters; variability in K; variability in radon levels. III: uncertainty in model parameters; uncertainty/variability in K; variability in radon levels.


BERRY'S WORLD By Jim Berry
10-10
Jim Berry 9.0
© 1988 by NEA, Inc
"Oh nothing — just sitting around worrying about radon!"


WARNING: RADON IS DEADLY IN THIS AREA.
You can't see it, smell it or even feel it. It just quietly attacks your lungs, until one day you find you have lung cancer.
It's called Radon. A naturally occurring radioactive gas that seeps into your home. In fact, it is the second-leading cause of lung cancer in America.
If your home has high levels of Radon, you're being exposed to as much radiation as having literally hundreds of chest x-rays in one year.
But there is something you can do about it. Testing for Radon is simple and inexpensive. And homes with high levels can be fixed. Call 1-800-SOS-RADON to get your test information.
RADON. THE HEALTH HAZARD IN YOUR HOME THAT HAS A SIMPLE SOLUTION.
EPA
Ad Council
RADON AWARENESS CAMPAIGN

United States Environmental Protection Agency | U.S. Department Of Health and Human Services | U.S. Public Health Service

Indoor Air And Radiation (6609J) | 402-K-02-006 | Revised May 2002

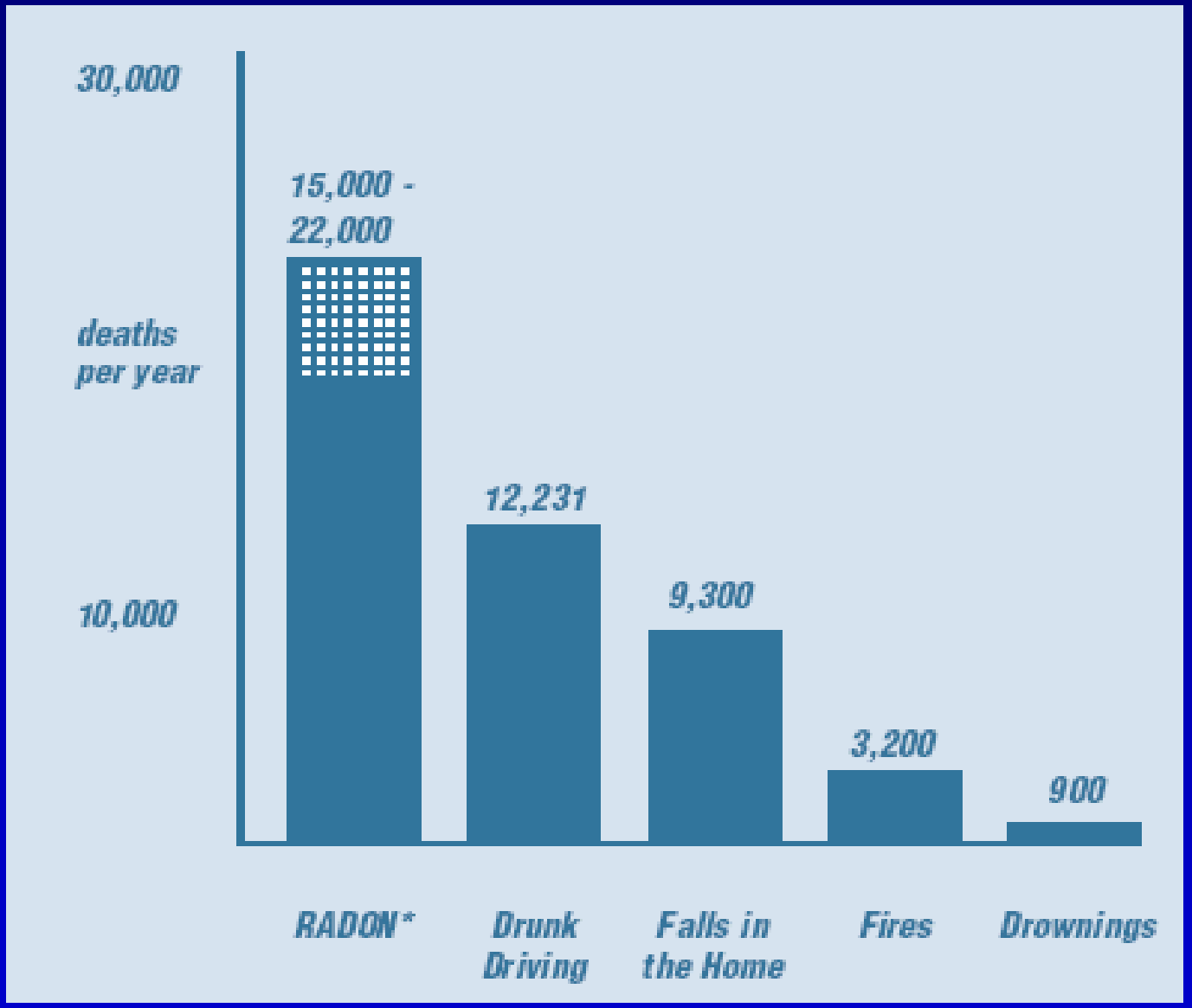
http://www.epa.gov/iaq/radon/pubs/citguide.html

EPA

CDC

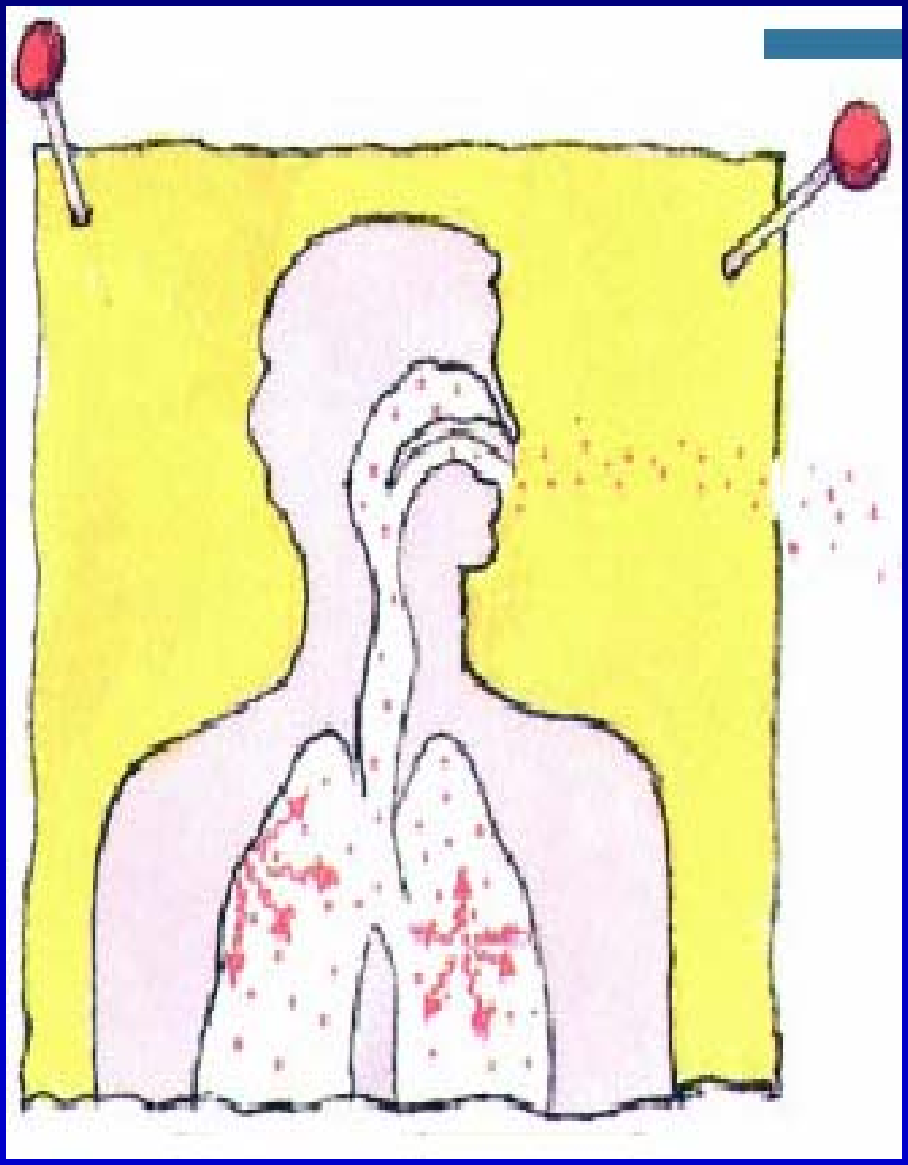
A Citizen's Guide To Radon (Fourth Edition)

The Guide To Protecting Yourself And Your Family From Radon



Source: EPA 2002

Scientists are more certain about radon risks than risks from most other cancer-causing substances.



Source: EPA *2002*

RADON RISK IF YOU SMOKE

Radon Level	If 1,000 people who smoked were exposed to this level over a lifetime. . .	The risk of cancer from radon exposure compares to. . .	WHAT TO DO: Stop Smoking and. . .
20 pCi/L	About 135 people could get lung cancer	100 times the risk of drowning	Fix your home
10 pCi/L	About 71 people could get lung cancer	100 times the risk of dying in a home fire	Fix your home
8 pCi/L	About 57 people could get lung cancer		Fix your home
4 pCi/L	About 29 people could get lung cancer	100 times the risk of dying in an airplane crash	Fix your home
2 pCi/L	About 15 people could get lung cancer	2 times the risk of dying in a car crash	Consider fixing between 2 and 4 pCi/L
1.3 pCi/L	About 9 people could get lung cancer	(Average indoor radon level)	(Reducing radon levels below 2 pCi/L is difficult)
0.4 pCi/L	About 3 people could get lung cancer	(Average outdoor radon level)	

Note: If you are a former smoker, your risk may be lower.

Source: EPA 2002

RADON RISK IF YOU'VE NEVER SMOKED

Radon Level	If 1,000 people who never smoked were exposed to this level over a lifetime. . .	The risk of cancer from radon exposure compares to. . .	WHAT TO DO:
20 pCi/L	About 8 people could get lung cancer	◂ The risk of being killed in a violent crime	Fix your home
10 pCi/L	About 4 people could get lung cancer		Fix your home
8 pCi/L	About 3 people could get lung cancer	◂ 10 times the risk of dying in an airplane crash	Fix your home
4 pCi/L	About 2 people could get lung cancer	◂ The risk of drowning	Fix your home
2 pCi/L	About 1 people could get lung cancer	◂ The risk of dying in a home fire	Consider fixing between 2 and 4 pCi/L
1.3 pCi/L	Less than 1 person could get lung	(Average indoor radon level)	(Reducing radon levels below 2 pCi/L is difficult)
0.4 pCi/L		(Average outdoor radon level)	

Note: If you are a former smoker, your risk may be higher. Also, based on information from the National Academy of Sciences 1998 report, *The Health Effects of Exposure to Radon*, your radon risk may be higher than shown, even if you have never smoked.

Source: EPA 2002

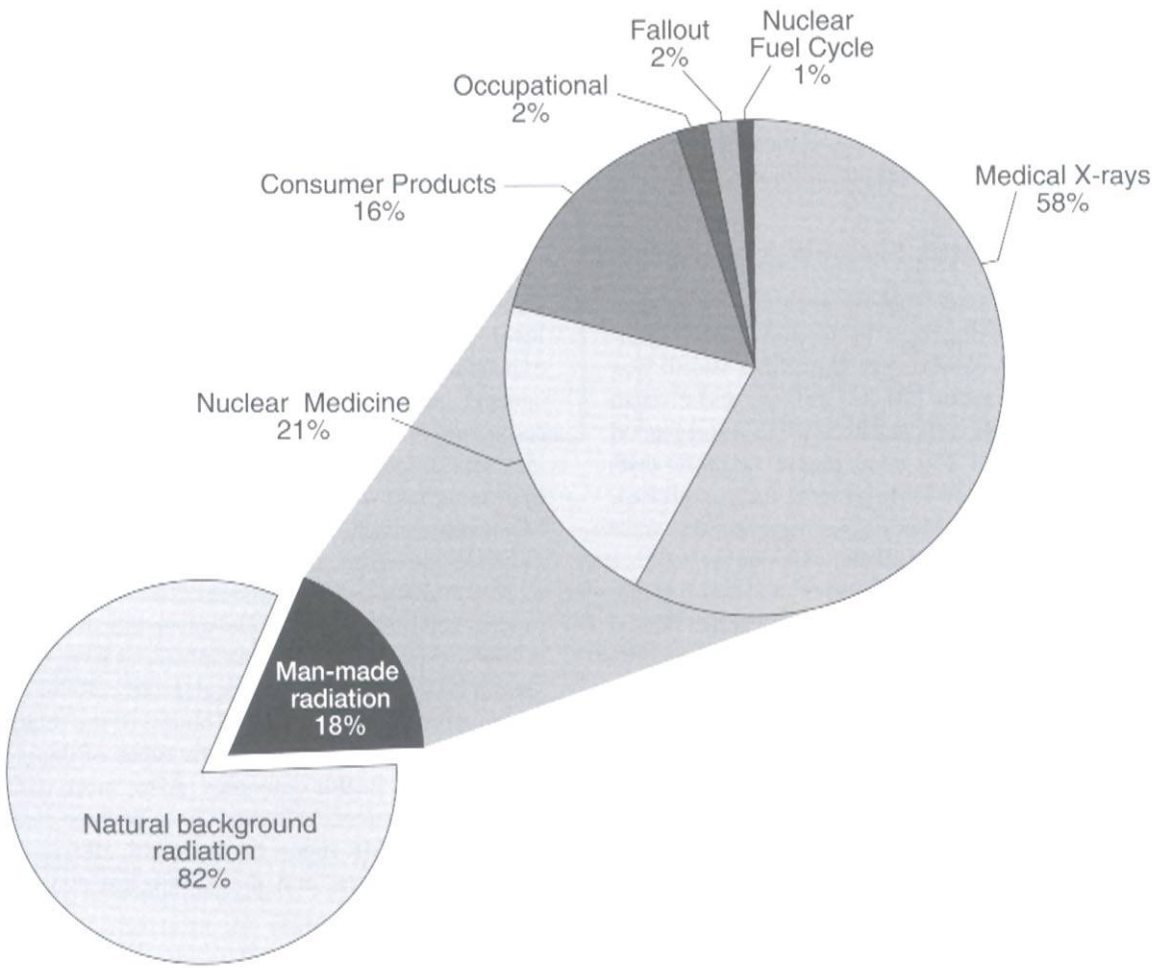


FIGURE PS-2 The pie chart in the lower left portion of the figure shows the contribution of man-made radiation sources (18%) relative to natural background radiation (82%) exposure of the population of the United States. Sources of man-made radiation are detailed in the upper right portion of the pie chart. SOURCE: Data from NCRP 1987.

Source: BEIR VII 2006

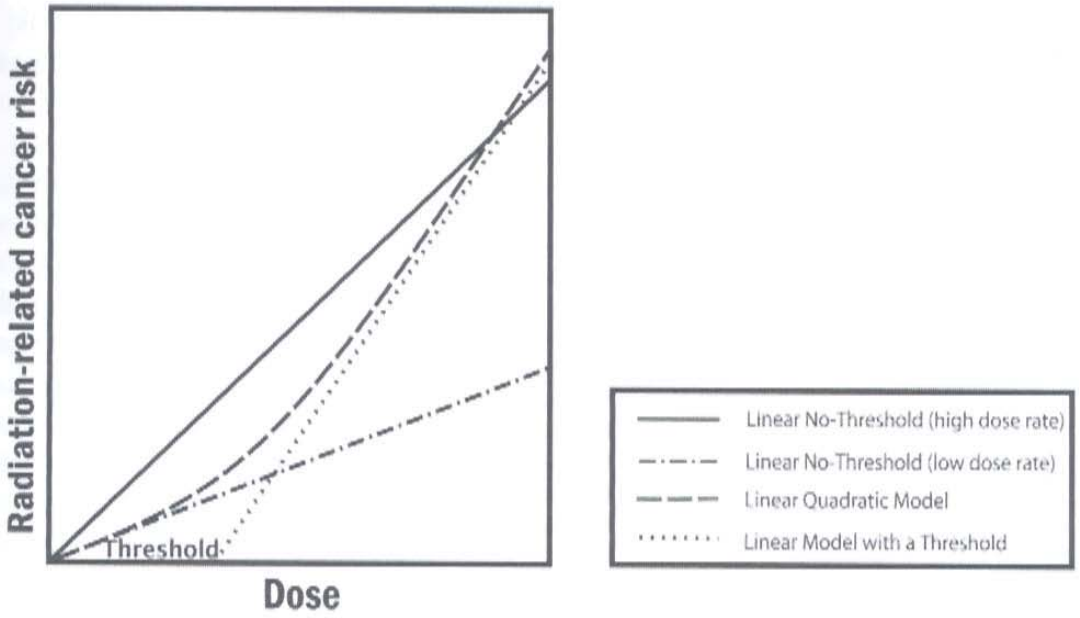


FIGURE PS-3 The committee finds the linear no-threshold (LNT) model to be a computationally convenient starting point. Actual risk estimates improve upon this simplified model by using a dose and dose-rate effectiveness factor (DDREF), which is a multiplicative adjustment that results in downward estimation of risk and is roughly equivalent to using the line labeled "Linear No-Threshold" (low dose rate). The latter is the zero-dose tangent of the linear-quadratic model. While it would be possible to use the linear-quadratic model directly, the DDREF adjustment to the linear model is used to conform with historical precedent dictated in part by simplicity of calculations. In the low-dose range of interest, there is essentially no difference between the two. Source: Modified from Brenner and colleagues.[17]

Source: BEIR VII 2006

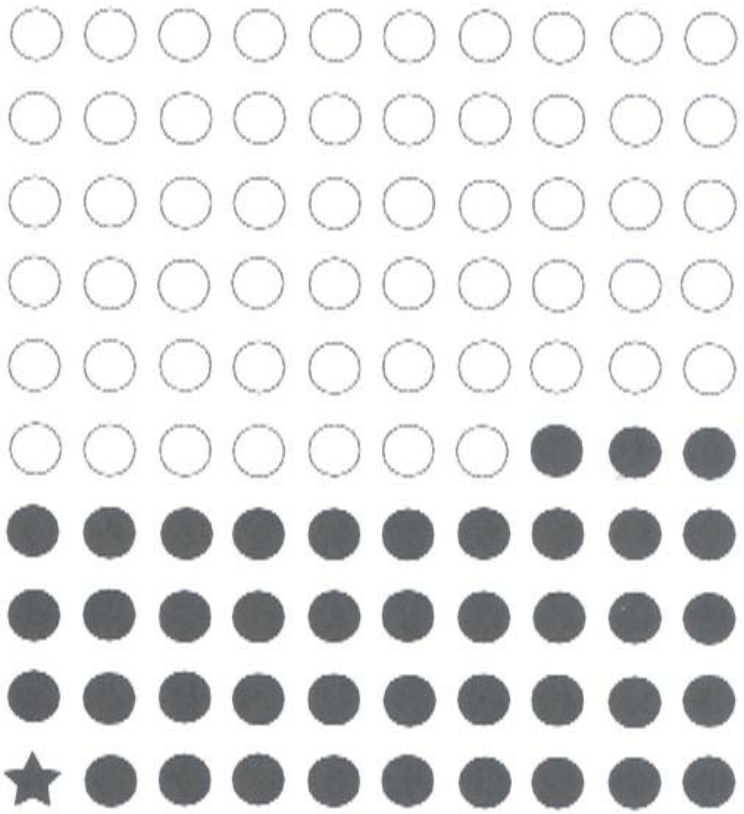


FIGURE PS-4 In a lifetime, approximately 42 (solid circles) of 100 people will be diagnosed with cancer (calculated from Table 12-4 of this report). Calculations in this report suggest that approximately one cancer (star) per 100 people could result from a single exposure to 0.1 Sv of low-LET radiation above background.

Source: BEIR VII 2006

Exercises in Risk Communication

1. **You are on the BEIR VI Committee, which estimates that from 15,400 to 21,800 lung cancer deaths per year can be attributed to radon.**
2. **You care out a case-control study of cell phone use and brain cancer. You estimate that the OR for ever use is 1.01 (95% CI 0.62-1.95).**
3. **You estimate that lifetime lung cancer risk for a smoking uranium miner is 25%.**
4. **You find that the relative risk for brain cancer increases by 2% for each dental X-ray (0.5-5%) across the life span.**