





Hazards of Uranium weapons in the proposed war on Iraq

Issues for Government & briefing for MPs, Peers & NGO's

Central Hall, Westminster Wednesday 26 February 2003 9.30 - 10.30 a.m.

Presenters

Professor Malcolm Hooper, Chief Scientific Adviser to the UK Gulf War Veterans Dai Williams, Work Psychologist, independent weapons researcher

Current US war plans for Iraq indicate that this will be no ordinary war. It is likely to be another "dirty war". This briefing covers crucial issues about radiological weapons excluded from the public debate about US & UK Government war plans.

The Weapons - Development of secret dense metal warheads since 1985. 23 weapon systems suspected of using from 300 grams to 7 tons of Uranium (depleted or undepleted). Purpose and US patents. Combat history. Indiscriminate effects are war crimes. Latest EU resolution (13 Feb) calls for investigation & moratorium on DU & other Uranium warheads.

What is the secret metal? Summary of weapons to be used in the attack on Iraq *. Demand for UN inspection of suspected US radiological bombs and targets.

The Dangers - Environmental & health effects of Uranium weapons - longer lasting than chemical or biological weapons. Incendiary effects & dispersal, airborne radiation in Greece & Hungary during Balkans bombing. Radiation and toxicity; acute & chronic exposure; early and delayed onset symptoms. No viable protection against airborne Uranium oxide lasting months. *Groupthink* cover-up of Uranium weapons by US & NATO trivialises known radiation hazards. UN inspections and Balkans veteran health data subverted by NATO. Afghan health disaster suppressed. Why do Ministers deny existence of US U-bombs? What warnings or misinformation have the Pentagon & MOD given to the Prime Minister? How can UK Government support or condone US war plans with radioactive weapons? Will Tony Blair demand and support independent (UNEP, not IAEA) environmental

The People at risk - Civilians & troops, Iraq and ME region. **Unfinished business** for Gulf, Balkans & Afghan veterans & civilians. Public health trends and suspected radiation related health epidemics. Slow genocide: lethal internal radiation effects become cumulative over 5-10 years. Increased vulnerability of women, children & impoverished communities.

monitoring and public radiation warnings from the start of any US attack on Iraq?

Does Government recognise the existing legacy of Uranium contamination and dire need for testing & medical support in Iraq? How will it justify genocide & fratricide?

- >> US War plans, scenarios and civilian safety priorities
- >> Programme & contact details

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^{*} See also presentation at http://www.eoslifework.co.uk/Uhaz7feb03/index.htm



US War plans & radiological warfare scenarios

Radiological warfare scenarios: low, medium & high contamination in urban & / or remote targets. Analysis of the US attack plans reported in the New York Times, 2nd February: Shock & Awe or Uranium Blitz? - 1500+ tons of suspected Uranium warheads in the first 48 hours, 5x more Uranium than 1991. Widespread decontamination is not feasible. Local decontamination is uneconomic even in the USA (refer US DU testing ranges).

Risk assessments for UK troops: Urgent review & disclosure of Balkans & Afghan veterans health status, including children is needed. What Uranium protection was used in Afghanistan? Full MOD assurances needed for radiological hazards in Iraq.

Civilian safety priorities

Health & safety assessments & precautions needed for local and expatriate civilians. This to include NGO's, media & other expatriates during and post-conflict. Immediate need to clarify Government and other employers' duty of care, and employee rights and duties to mitigate risk.

Prevention: no war, or no expatriate civilians, or guaranteed no use of radiological weapons.

Response to radiological weapons attack: protection, detection, warnings, decontamination & evacuation.

Risk assessments for civilians: Immediate hazards near targets; immediate protection from acute exposure (0-12 hours). Cumulative risks as radioactive plumes spread and merge (12 hours onwards) - rapid evacuation from high contamination essential.

Immediate precautions: ultra fine dust protection (<1.5 microns) for air, food and water.

Rapid evacuation criteria - advance planning and assurances needed:

- from Government to troops and expatriates in the event of radiological warfare.
- to Iraqi and other displaced civilians permanent evacuation of severely contaminated areas to other countries and countries. Not evaluated in Afghanistan.
- re US/UK liability to assist and compensate refugees if radiological weapons are used?

Programme - at Central Hall, Storey's Gate, Westminster, SW1H 9NH

9.00	Coffee, briefing information.
9.30 - 10.00	Briefing presentations - Hooper, Williams.
10.00 - 10.30	Questions and priorities for debate in Parliament
10.30 - 11.00	Further discussion on priorities for NGO's etc.

No fee but please contact Dai Williams to reserve places & coffee.

Contacts & Internet sources

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UK DU Oversight Board	http://www.duob.org.uk/
UK MOD Depleted Uranium information	http://www.mod.uk/issues/depleted_uranium