

Rational Policy for Medical Radiation: Hype or Hope?

To the Editor:

It is not a surprise that Stern, a radiologist, challenged that any medical radiation exposure above background radiation, no matter how small, results in a linear increase in cancer induction.¹ The American Association of Physicists in Medicine recently stated that risks from computed tomography (CT) imaging are “too low to be detectable and may be non-existent.”²

Stern’s arguments against the “linear, no threshold” model fell short against scientific analysis.^{3,4} His position also ignored the Institute of Medicine’s report concluding that ionizing radiation contributes more to the development of breast cancer than any other type of routine environmental exposure.⁵ Moreover, use of CT scans in children to deliver cumulative doses of about 50 mGy might almost triple the risk of leukemia, and doses of about 60 mGy might triple the risk of brain cancer.⁶

Why do some radiologists enduringly fly in the face of the evidence? Is it for the patients’ interest? Radiologists must be engaged in concrete quality programs for justifica-

tion (performing a CT examination only when it is medically necessary), optimization strategies (lowest reasonably achievable dose), and traceability of patients’ exposures. Rational policy, as indicated in Stern’s title, is far from being implemented.

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