

GARY P. POSNER, M.D.
6219 PALMA DEL MAR BLVD. #210
ST. PETERSBURG, FLORIDA 33715

May 23, 1982

Peter Rank, M.D.
Radiology Consultants
309 W. Washington Avenue
Madison, Wisconsin 53703

Dear Dr. Rank,

A belated thank you for your April 10 response to my initial letter concerning the "Cash- Landrum UFO Radiation Case". I have decided to take you up on your invitation to write again for further assistance.

I continue to have questions regarding several effects of radiation exposure:

1) Regarding epilation---Does this occur within a few days? (never/rarely/often/usually/always).

---Does it take 2-3 weeks to begin? (never/rarely/often/usually/always).

2) Regarding diarrhea---Can this persist for several weeks following non-lethal exposure? (never/rarely/often/usually/always).

---Does diarrhea lasting for more than a very few days indicate a fatal exposure? (never/rarely/often/usually/always).

3) Regarding dermatitis---Can a non-healing (after 8 months) ulcerative-type lesion result from an exposure of less than 300 (LD₅₀) rads? (never/rarely/often/usually/always).

---Does acute radiation dermatitis, resulting in a non-healing ulcerative lesion, indicate an exposure of fatal proportions, i.e. approx. 1000 rads? (never/rarely/often/usually/always).

Thank you for your continued cooperation in this matter.

Sincerely,


Gary P. Posner, M.D.



May 28, 1982

Gary P. Posner, M.D.
6219 Palma Del Mar Boulevard, #210
St. Petersburg, FL 33715

Dear Doctor Posner:

Thank you for your letter of May 23. Your questions, of course, are quite penetrating. The thrust of your questions is to naturally elucidate some information about the nature of radiation and whether the "Cash-Landrum Case" fits into it.

Presumably, the information I provide to you would provide background for you to make a judgment as to whether my opinion had merit, specifically, that Mrs. Cash and Mrs. Landrum suffered from radiation exposure following their 1980 incident.

Certain assumptions underlie your questions. You have implied that a standard kind of exposure to radiation occurred and specifically that it would be a whole body dose. I think those assumptions are quite simple, in relationship to this case. Insufficient information is available about this, and all other similar UFO cases, to establish an underlying model which can be manipulated in a medical sense or, indeed, in terms of physics.

Certainly, Mrs. Cash's and Mrs. Landrum's symptoms and signs are consistent with radiation exposure, specifically ionizing radiation.

It goes beyond the evidence to speculate as to the exact wave length, dosage, or type of body exposure. Speculation beyond the facts, which is primarily the thrust of your questions, is inappropriate at this time.

Nevertheless, I will try and answer your questions, although the answers must admittedly be vague.

1. Regarding epilation, it may occur anywhere from a few days up to a year.
2. Regarding diarrhea, it may persist for days or weeks following a non-lethal exposure.

Downtown

345 W. Washington Ave.
P.O. Box 222
Madison, WI 53701
608 252-8400

West

7102 Mineral Point Rd.
Madison, WI 53717
608 833-3616

East

4117 E. Washington Ave.
Madison, WI 53704
608 244-4330

Atwood

2453 Atwood Ave.
Madison, WI 53704
608 249-7694

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3. The dermatologic manifestations of radiation depend upon the wave length and the total dose and may be either acute, chronic, or a mixture of both. Some immediate post-radiation dermatitides begin within hours of exposure. Others do not develop for 20 years.
4. An acute radiation dermatitis may result in a non-healing ulcerative lesion and it may not necessarily indicate an exposure of fatal proportions.

Old-time workers in radiology suffered acute, sub-acute and chronic exposure. This exposure was sometimes a mixture of local and total body radiation. The symptoms were as diverse as the people involved.

May I refer you to a recent book on this whole matter. The title of the book is The Medical Basis for Radiation Accident Preparedness, edited by Carl F. Hubner and Shirley A. Fry. It was published in 1980 and is a wonderful collection of articles that should answer all of your questions. It includes studies of the early Los Alamos nuclear accidents, follow-up studies on exposed Japanese fisherman, follow-up studies on the Marshallese people after the 1954 Bikini incident, comparisons of acute, accidental irradiations, which were expertly studied by Dosimetrists. It includes radiation damage secondary to both particulate and electromagnetic type of radiation and includes a number of isotopic accidents.

I recommend this book to you, to emphasize the incredible diversity of response, and to emphasize also that Mrs. Cash's and Mrs. Landrum's signs and symptoms fall within that diversity.

Sincerely yours,



Peter Rank, M.D.
Director
Department of Radiology

PR/alw