

Parliamentary Standing Committee on Public Works

Supplement to Flinders Local Action Group Submission Number 5

SUBJECT: Australian Nuclear Science and Technology Organisation (ANSTO) Intermediate Level Solid Waste (ILSW) Storage Facility Lucas Heights, NSW

Introduction:

Since we forwarded our submission we have researched some additional information. We believe it is relevant for this Public Works Standing Committee to consider this information.

Summary:

- We believe that ANSTO should be pursuing research into the latest Cyclotron technology as a way to transition from the continued production of nuclear waste.
- We believe that there should be much more public information about the uses and benefits of Cyclotron technology.
- We would like to see the cost/benefit comparison between expanding the Lucas Heights operation and the increased use of cyclotrons in medical institutions around the country.

Medical Waste:

For over 5 years the NRWMF sales pitch has repeatedly stated that “One in every two Australians will need treatment with radioisotopes at some stage in their life, or know someone who does”. This comes with the emotive implication that Lucas Heights may have to curtail or cease production of isotopes if the NRWMF is not established - because it will run out of room to store the waste. We know this is wrong. ARPANSA has said, “...waste can be safely stored at Lucas Heights for decades to come.” (Quote from Dr Carl Magnus Larsen to Senate Committee June 2020)

In 2017, information from the Medical Association for the Prevention of War (MAPW) told us that most waste from hospital nuclear medical treatments, including decayed isotopes, gloves and gowns etc. is disposed of in the hospitals. On 10th October, 2017, Dr Geoff Currie, Associate Professor in Nuclear Medicine, Charles Sturt University gave a presentation to the Barndioota Consultative Committee. (Quote from the BCC Meeting Notes - 10-10-2017):

- “Dr Currie advised that nuclear waste from nuclear medicine procedures in hospitals is virtually zero. While many hospitals do hold radioactive waste, the use of the nuclear medicine will not contribute to radioactive waste in hospitals because it is either recycled (generators sent back to ANSTO) or this short lived product is stored for 10 half-lives and then it is indistinguishable from background and disposed of as hospital waste”.

What is not part of the sales pitch is that the majority of the waste (by toxicity if not by volume) is generated at Lucas Heights in the process of making radioisotopes. The public generally is not well informed that ANSTO intends to greatly increase isotope production to supply international markets, meaning a great increase in the production of nuclear waste as well.

Meanwhile, other nuclear powered nations, Canada, Japan, USA and UK for example, are developing new technologies that do not need a nuclear reactor to produce medical isotopes and do not produce radioactive waste.

Cyclotron Technology:

We had intended to make reference to this subject in this supplementary submission but it has already been well covered by Dr Margaret Beavis (Submission 9 - on behalf of the Medical Association for the Prevention of War). She has explained the topic far more authoritatively and eloquently than we could, with references sourced and links provided.

We strongly support the MAPW submission. We are not the only ones to believe that there should be a much wider conversation in the community about how our nuclear medicine is sourced and delivered. The options should be laid out openly and evenly.

Conclusion:

We have already had first-hand experience of how our Federal Government has gone about the process of trying to gain approval for a national nuclear waste facility. The list is long and the grievances many. Two examples are enough:

- The guidelines for shortlisting three property nominations in two SA locations (in the same Federal Electorate, 200 kms apart) were not uniform.
- The definition of who was eligible to take part in the “Yes/No” ballot was proscriptive and different in the two LGA’s, Kimba and the Flinders Ranges.

Both the Government and the Opposition need to be aware of the great trust deficit prevailing in the community, not just in Australia but globally. To be heard does not necessarily equate to being listened to.

Greg Bannon,

(On behalf of the Flinders Local Action Group)

31/07/2021