Minutes for meeting of EBMT Nuclear Accident Committee
Monday, 8th April 2013, South Gallery Room 30
2-5 pm, London Excel Centre
Chairman: Prof Ray Powles

Ray Powles – Chairman, EBMT NAC
Alejandro Madrigal, President, EBMT
Bhawna Sirohi – Secretary, EBMT NAC
Michel Drouet, CRSSA, France
Akihiro Sam Shimosaka, Japan
Hyo Rak Lee, Korea
Robert Gale, USA
Dietger Niederwieser, University of Leipzig, Leipzig,
Leif Stenke, Karolinska University, Sweden
Urs Schanz, Switzerland
Masazumi Akahoshi, Hiroshima, Japan
Hans Joachem-Kolb, Germany
Ming Yao, Taiwan yaomingmd@gmail.com
Willis Navarro, US NMDP /RITN

1/ Apologies for absence
Fernando Leal da Costa, Portugal
Boris Afanasyev, Raisa Gorbacheva Memorial Instt, St Petersburg, Russia
Parvez Ahmed Armed Forces BMT Centre, Rawalpindi, Pakistan
Arnon Nagler, Chaim Sheba Medical Center Tel Aviv, Israel
Mahmoud Al Jurf, King Faisal Specialist Hospital, Saudi Arabia
Ardeshir Ghavamzadeh, Tehran, Iran
Duncan Cox, UK
Tony Bleetman, UK
Hu Chen, China
Mélanie Chaboissier, EBMT
Andreu Gusi Puig, EBMT
Elena Buglova, IAEA
Zhanat Carr, WHO
Agnes Buzyn, IRSN, Paris
Alberto Bosi, Italy
Monika Fliedner, Switzerland
Ted Fliedner, University Hospital of Ulm, Germany
Anna Sureda, UK
John Goldman, UK
Jane Apperley, UK
Graham Jackson, UK
Tony Pagliuca, President, BSBMT, UK
Hilary Walker, EPD, DoH UK
Nick Gent, HPA, UK
Norbert-Claude Gorin, France
Minutes Meeting 6th June agreed.

Matters arising. As per agenda items to follow.

4/ NAC Activity 2002/13 (.RP) –

Annual Meeting Geneva

Scientific Session

3rd Meeting Asian Cellular Therapy Organization ACTO. Chiang Mai Thailand 15-17th Nov 2012 Joint EBMT ACTO Session Nuclear Accidents
Chairs Ray Powles UK Akihiro Shimosaka
Ray Powles UK EBMT Radiation Preparedness.
Shuichi Taniguchi Japan Fukushima
Hu Chen Nuclear Accidents PR China
Cho Minsu Radiation Preparedness Korea
Yao Chand Chen Cryoprotective potentials placenta-chorionic MSC for radiation victims

Workshop De Radiobiologie Paris 17th-18th September 2012
Institute de Recherche Biomedicale des Armees
Ray Powles Fukushima Therapies Controversies.
Official Invited Observer. Hyderabad Basavataram Ind American Cancer Hospital
Medical CBRN Disaster Training and Mock Drill 31-1st Sept 2012 Gen JK Bansal Member
National Disaster Management Authority NDMA India and Americares India
Lecture Ray Powles EBMT Radiation Preparedness

Peoples Republic China PLA Bejing Forum on Stem Cell Transplantation Sept 15th 2012
Institute of Military Medical Science Affiliated 307 Hospital
Ray Powles HSCT therapy for Nuclear Accidents

Fukushima Update and collaborative meetings Tokyo Japan
Prof Tomomitsu Hotta President Japanese NCC Prof Yamashita Fukuda Takuya Yamashita National Cancer Centre Hospital
5/ Funding : Thomas Klein has written to various governments and will provide an update. As of 23rd Jan 2013 Viktor Meineke is in discussions with the EU. Things are a bit more complicated as expected, as responsibilities have changes totally after Fukushima. The same refers to the personnel. We first had to find out, who now is responsible for funding for our activities. Currently there is no Rad/Nuc program actively dealing with mass casualties after a terrorist attack. And for instance DG Sanco is not responsible for health effects after radiation exposure, at least not in first line. This sound strange and indeed this is a fact.

But therefore there are other programs that might fit pretty well. Fukushima will be the key word. We will have a personal meeting there soon at a quite high level within the next weeks and hope to report good news to you.

6/ Strategy for taking EBMT Training Programme template forward (RP/BS)

The Training Programme for EBMT London was cancelled because of a very low registration. The reason was the timing of the training programme, scheduled for the afternoon of after EMBT2013 had finished meant that people would need to stay in London for a further night and way forward. It was agreed that we would reduce the training programme to two and half hours and have it scheduled in Milan early on the morning of the last day of the conference. It was also agreed that the template for the future is to have the local host country for EBMT to take some ownership of training programme, which would be directed at all the EBMT Centres in the host country. The aim would be to train one person from each centre (not necessarily a doctor) , who would then be the link person in the event of a major radiation incident.

7/ Website – Current website has areas on the NAC missing. RP to liaise with Melanie in Barcelona and update the website. Training course slide set also to be added to the website.

8/ International Network (open meeting with Power-point presentations)

UK – HW is away in south Korea. The UK
USA- WN updated about the RITN work. They have just completed a table top exercise. RITN conference is on July 31st-2nd august to discuss national response to events, G-CSF stockpiling etc.
France- Michel Drouet IRBA updated about the French activities.
Sweden- Leif Stenke presentation attached. RP talking on the course (Joint EBMT initiative) being organised in May 2013.
Korea-Hyo Rak Lee- Slides attached. Live demonstration of the Korean mock exercise was also shown involving more than 600 people
Japan-Shimosaka A- Slides attached.
Switzerland- Urs Sanz- In process of setting up a preparedness network for Geneva, Basel, Zurich. A training programme to be done in Switzerland with EBMT initially
Taiwan- Ming Yao- slides attached. Asia Pacific meeting in Taiwan between july 18-20th.

9/ EBMT Annual Meeting London Workshop on long-term Cardiovascular Effects of Total Body Irradiation
The Workshop on Long-term Cardiovascular Effects following the Japanese Atom Bombs, we discussed the feasibility of the EBMT patient resource being used in a prospective study of patients who have received TBI. It is known that Breast and Lymphoma patients who have been irradiated get cardiac problems.

But the key to this possible study if we go ahead is not just its prospective nature, but also exploring having it driven by cardiologists with cardiology science and exclusive cardiology funding. As such the PI would need to be a cardiologist because it will be cardiologists that do all the clinical work.

9.1 The 30 to 50 years follow-up data will be the key and the maximum follow-up at present for significant numbers in the EBMT registry is only 30 years, so now it is to timely to start this study.
9.2 Ask Miriam for a denominator of TBI survivors decade on decade
9.3 The Nagasaki statisticians and cardiologists (a big department at Nagasaki) whether with what they have seen following the atom bombs it can be extrapolated to a TBI model.
9.4 Hence a feasibility meeting with them as the first step.
9.5 It would be essential their statisticians were the drivers to what we are looking for because it is their model.
9.6 Lastly there is the whole area of what will be the control group…….in Japan they used the unaffected population and our cardiology advisors would be have input into this, but also we might have a third group of non irradiated leukaemia patients (maybe matched cohorts) and our statisticians would be brilliant for this.

10/ Any Other Business
Dietger Niederwieser (DN) updated about the WBMT, will email mission, vision to be added to minutes. RP invited to the meeting in October 3-5th 2013 in Salvadore, Brazil. He would very much like NAC representation in WBMT.
WBMT has an NGO status by WHO.
RP to send template of training programme to DN
Next President elect of WBMT is Dr Kodera. DN completes term in april 2014.

10/ Date of Next Meeting