# VITAL SIGNS

NEWSLETTER OF THE INTERNATIONAL PHYSICIANS FOR THE PREVENTION OF NUCLEAR WAR (IPPNW)

## "We need to act now" What the coronavirus pandemic teaches us

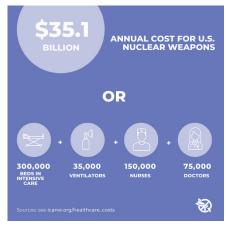
The public health and social impacts of the COVID-19 pandemic are truly shocking. In a matter of months, the novel coronavirus has killed more than 100,000 people and has infected millions. The pandemic has caused profound social and psychological suffering, has brought much of our modern world to a near stand-still, and has left many national and local health services struggling to cope with the scale of the disaster.

Yet, as IPPNW Co-President Ira Helfand pointed out in an article for CNN, the pandemic "did not just 'sneak up on us.' Public health experts have been warning us for decades; we simply chose not to listen." Despite the clear warnings, Dr. Helfand noted, "world leaders failed to prepare, and the general public did not mobilize to make them take action."

Dr. Helfand's criticism should sound very familiar to those of us who advocate for the elimination of nuclear weapons. A big lesson to be learned from the pandemic, he said, is that we need to act now to prevent "the other two existential threats that humanity faces: the climate crisis and the growing danger of nuclear war."

IPPNW has warned for decades that medicine will have nothing to offer the victims of a nuclear war; the number of casualties would overwhelm any remaining medical resources. Even the use of a single nuclear weapon would cause an unprecedented catastrophe.

In fact, the largest US thermonuclear weapon would unleash an explosive



Shifting expenditures on nuclear weapons to rebuilding the world's health care infrastructure would better prepare us to deal with global pandemics. Eliminating nuclear weapons entirely would put an end to the existential threat of nuclear war. ICAN graphic (icanw.org)

force 100,000 times more powerful than the crude atomic weapons used against Hiroshima and Nagasaki 75 years ago. The Hiroshima bomb alone destroyed most of the city's hospitals, killed or injured most doctors and nurses, and left more than 100,000 victims suffering acute burn, blast and radiation injuries without treatment.

The coronavirus pandemic has overwhelmed the world's medical infrastructure. A nuclear war between the US and Russia—with more than 14,000 nuclear weapons between them—would largely destroy it. Moreover, IPPNW and climate scientists have shown that climate disruptions from a regional nuclear war using only a small fraction of current global arsenals would cause massive crop failures and worldwide food shortages, triggering a global famine. Up to two billion people could starve

to death, ending civilization as we know it. Pandemics do not respect national borders, and neither will a nuclear war.

Noam Chomsky recently observed that the coronavirus, while horrific, *(continued on page 3)* 

### TPNW ratification push continues, with 14 to go

The COVID-19 pandemic has upended lives worldwide and disrupted plans for nearly all organizations and governments. While the need for united effort to combat global threats has never been more obvious, getting governments to focus on the threat posed by nuclear weapons and nuclear war has become more challenging.

Nevertheless, in the last few months, two new countries—Belize and Nauru—have signed the Treaty on the Prohibition of Nuclear Weapons (TPNW) and three countries—Antigua and Barbuda, Namibia, and Paraguay—have ratified the nuclear ban treaty. (continued on page 3)

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## 75 years since Hiroshima and Nagasaki For the Hibakusha, the quest for abolition goes on

[Ed. note: As the 75th anniversary of the US atomic bombings of Hiroshima and Nagasaki approaches, we invited Dr. Masao Tomonaga—a long-time IPPNW leader and a Nagasaki survivor—to reflect on the legacy of those events and the work that remains to be done.]

by Masao Tomonaga, MD, Professor Emeritus, Nagasaki University

Seventy-five years have passed since Hiroshima and Nagasaki were destroyed by atomic bombs in August 1945. Approximately 210,000 people died, while a comparable number—known since then as hibakusha—survived. Both cities were demolished and it was several decades before they were restored to modern cities.

The long-term damage to hibakusha health manifested itself in three phases: leukemia appeared as the first malignant disease as early as 1949, and continued for almost 15 years; many types of cancer developed during an intermediate phase; and we have seen a lifelong occurrence of cancers and leukemia (MDS) among hibakusha exposed to radiation as children.

Psychological damage, such as depression and post-traumatic stress disorder are also persisting.

We don't yet have firmly established medical evidence of the genetic transmission of radiation-induced damage, inducing malignant diseases and malformations, to the second generation hibakusha, despite some positive evidence for experimental animals such as mice and rats, including recent proof of gene abnormality transmission at the DNA level.

If such transmission of genetic abnormalities is found to be the

case, the fourth phase will be the medical consequence of the bombings carried over to subsequent generations.

Thus, the human consequences of the bombings have not yet reached their full extent, and the total number of casualties cannot yet be calculated. Many people are still dying of radiation-induced malignant diseases. More than 100,000 hibakusha still live in both cities, in Tokyo, and in other parts of Japan and elsewhere. Their mean age is 83 years old.



Many hibakusha, even while they are continuing their battle with the radiation consequences, are simultaneously campaigning for the elimination of nuclear weapons. They cannot wait until the 100th anniversary of the bombings, by which time few if any will still be alive.

Hiroshima and Nagasaki have regenerated remarkably after several decades, coincidentally with Japan's economic recovery during the 1950-70s. Despite the resurrection of these two cities, however, we hibakusha still don't see a world free of nuclear weapons. On the contrary the world has been divided into nuclear-weapon-possessing nations and their allies on the one hand, and nations promoting the prohibition of

nuclear weapons, along with civil society, on the other. This divide is serious and will have to be addressed after the ratification of the Treaty on the Prohibition of Nuclear Weapons (TPNW). ICAN, which was awarded the 2017 Nobel Peace Prize for its work to help achieve the treaty, will face a new set of challenges once it enters into force.

As the COVID-19 pandemic has spread globally, and the number of deaths has multiplied rapidly, we have been compelled to seriously recognize the absolute necessity of confidence-building and cooperation among all nations, without exception. This situation is very similar to what we IPPNW physicians have faced since the foundation of our federation in 1980. Our founding copresidents, Dr. Bernard Lown and Dr. Evqueni Chazov, then loudly said that the nuclear weapons and nuclear deterrence policy were a pandemic disease endangering world security.

Global warming and the climate crisis is another pandemic in our time. Facing these multiple global crises will require global cooperation and confidence-building. National egoism, to the contrary, is dangerous to all nations. We hibakusha have known this for 75 years, and it remains at the heart of our message as these pandemics come together!

As the only group of homo sapiens that has experienced the use of nuclear weapons in wartime, we hibakusha have engaged in a lifelong movement to eliminate nuclear weapons. Political leaders, especially in the nuclear-armed states, must heed the wisdom and ethics of the hibakusha to save homo sapiens from possible extinction by nuclear winter and famine after a catastrophic nuclear war.

### Lessons from the pandemic

(continued from page 1)

pales in comparison to the threat of nuclear war and the climate crisis. "We are racing to the edge of disaster," he said, "far worse than anything that's happened in human history."

We now know more clearly than ever that we live in a small, interdependent world with fragile health and social systems that can be quickly overwhelmed. The world will be forever changed by this pandemic, but we will survive. Ordinary citizens, however, must now push world leaders hard to take urgent action to save

humankind from a collapse of our climate and the use of nuclear weapons. IPPNW and our partners in ICAN continue to spare no effort—even as we comply with the new social distancing norms—to ensure the early entry-into-force of the Treaty on the Prohibition of Nuclear Weapons. The nuclear-armed states and their allies must join the responsible nations of the world that have rejected nuclear weapons and that are demanding an end to the deadliest force man has ever created.

Every IPPNW member and supporter is vital to our success, especially now, in these challenging times.

Please contribute at: ippnw.org/donate.html



Participants in the first virtual ratification ceremony documented the occasion with a Zoom screenshot on 20 March, when Namibia became the 36th member of the TPNW. (From top left) Seth Shelden (ICAN); Celine Nahory (ICAN); and Namibian representatives Collin Namalambo, Neville Gertze (w/ratification document), and Julia Imene-Chanduru.

## Ban treaty ratifications show steady progress despite social distancing

(continued from page 1)

This brings the total ratifications up to 36, with only 14 more remaining before the TPNW enters into force, triggering the first meeting of states parties for a new, official international nuclear weapons treaty.

Namibia's ratification on 20 March was the first since social distancing orders were put in place at the UN headquarters in New York. This event was celebrated virtually by Namibian diplomats, the UN Office of Legal Affairs, and our own ICAN representatives (see photo). With this precedent now set, campaigners are improvising continued contact with their governments, some of whom have been quite close to either signing or ratifying this year. ICAN and IPPNW are encouraging government leaders to follow Namibia's example of pressing ahead with their TPNW signature and/or ratification plans.

Despite these inevitable delays, we still expect entry into force soon—we hope before next year's Nuclear Non-Proliferation Treaty Review Conference, which was itself postponed until April 2021 by the COVID-19 pandemic.

#### **TPNW Ratification Update**

As of mid April, 81 states had signed the Treaty on the Prohibition of Nuclear Weapons; **36 states** had submitted their ratification instruments. The Treaty will enter into force once 50 states have ratified it.

Algeria, Angola, Antigua and Barbuda, Austria, Bangladesh, Belize, Benin, Bolivia, Botswana, Brazil, Brunei, Cabo Verde, Cambodia, Central African Republic, Chile, Colombia, Comoros, Congo Republic, Cook Islands, Costa Rica, Cote d'Ivoire, Cuba, DRC (Congo), Dominica, Dominican Republic, Ecuador, El Salvador, Fiji, Gambia, Ghana, Grenada, Guatemala, Guinea-Bissau, Guyana, Holy See, Honduras,



Indonesia, Ireland, Jamaica, Kazakhstan, Kiribati, Laos, Lesotho, Libya, Liechtenstein, Madagascar, Malawi, Malaysia, Maldives, Mexico, Myanmar, Namibia, Nauru, Nepal, New Zealand, Nicaragua, Nigeria, Palau, Palestine, Panama, Paraguay, Peru, Philippines, St. Kitts and Nevis, St. Lucia, Saint Vincent and Grenadines, Samoa, San Marino, Sao Tomé and Principe, Seychelles, South Africa, Tanzania, Thailand, Timor-Leste, Togo, Trinidad and Tobago, Tuvalu, Uruguay, Vanuatu, Venezuela, Vietnam, Zambia

ONLINE: www.icanw.org/status-of-the-treaty-on-the-prohibition-of-nuclear-weapons/





### IPPNW WORLD ROUNDUP

As the coronavirus pandemic forced postponement or cancellation of activities around the world, IPPNW doctors and medical students, often on the front lines confronting this global public health crisis, have continued to press for the elimination of nuclear weapons and the prevention of armed violence.



IPPNW co-president Dr. Ira Helfand warned of the dangers of nuclear weapons at the University of Arkansas' Clinton School of Public Service at an event hosted by Pax Christi, Little Rock. He urged members of faith communities to sign up for the Back from the Brink Campaign (preventnuclearwar.org), a US grassroots movement working to abolish nuclear weapons.

Arkansas Catholic photo by Aprille Hanson www.arkansas-catholic.org

Barcelona, Spain recently joined the ICAN Cities Appeal, a commitment by cities and towns to show support for the TPNW and call on their governments to join. The mayor of Barcelona welcomed Setsuko Thurlow (third from left) and IPPNW Latin American Regional Vice President Dr. Carlos Umaña (center), during the signing ceremony.



Dr. Jans Fromow-Guerra of IPPNW Mexico represented the federation in February at a Mexico City ceremony to commemorate the 53rd anniversary of the Treaty of Tlatelolco, which prohibits nuclear weapons in Latin America and the Caribbean. The event was organized by OPANAL, the intergovernmental organization of 33 regional states whose members have led the way toward entry into force of the TPNW.





Dr. Masiku Phiri, president of IPPNW Zambia and Secretary General of the Zambia Medical Association, is leading an effort to accelerate his government's ratification of the TPNW—something they are now on the verge of doing despite the COVID-19 pandemic. Zambian doctors look forward to having their country join the growing number of ban treaty member states from Africa.



"IPPNW Germany's staff is mostly working from home, using telephone and video-conferences to replace most regular face-to-face meetings. We are watching with great anxiety how the pandemic is affecting safety at nuclear power stations, planned NATO military maneuvers, the situation in refugee camps and regions ravaged by war and conflict, and the urgent need for nuclear abolition."

—Alex Rosen, co-president IPPNW Germany

Indian Doctors for Peace and Development held an international seminar on militarization, nuclearization, and climate change in New Delhi in early March, before the pandemic forced a nationwide lockdown. Participants from 13 Indian states condemned the ongoing violence around the world, particularly "low intensity conflicts" that could escalate to the use of nuclear weapons.





"The recent appeal [by the UN Secretary-General] for a global ceasefire amid the COVID-19 pandemic should be strongly supported," wrote MAPW president Sue Wareham (left in photo). "Wars not only destroy health directly, but they also destroy healthcare systems, facilities and health workers. Healthcare not warfare must be our goal, now and in the post-COVID world." Earlier this year, Dr. Wareham spoke to a crowd of thousands at the People's Climate Assembly outside the Parliament House in Canberra. "Health and peace are already suffering from our changing climate," she said.

WHO map: confirmed Covid-19 cases as of 21 April, 2020 https://covid19.who.int

## Thyroid cancer increasing nine years after Fukushima

Fukushima Medical University has published new thyroid cancer data from its ongoing screening study of children exposed to radioactive contamination from the March 2011 reactor meltdowns at the Fukushima Daiichi nuclear power station. The new data, according to Dr. Alex Rosen, co-chair of IPPNW-Germany, shows a disturbing increase in the number of thyroid cancer cases and increased numbers of nodules and cysts in the thyroid glands of children participating in the screenings.

"The official rate of new cases of thyroid cancer in children under 25 years of age in Japan in the ten years 2000-2009 was 0.59 per 100,000 per year. Today, nine years after the beginning of the nuclear catastrophe in the investigated population of about 218,000 patients, 11.5 thyroid cancer cases would have been expected.

The actual number of thyroid cancer cases in Fukushima, however, is significantly higher. The 197 diagnosed cases in the study cohort represent an increase by a factor of 17 compared to the expected number of cases. A closer look at the numbers, Dr. Rosen says, suggests that the ratio may be 23:1 or even higher.

Dr. Rosen also cautions that the

number of participants in the screenings has gone steadily down since 2011, resulting in an incorrect inference that the number of new cancers has gone down, when, in fact, they are merely going undetected or unreported.

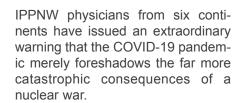
"We continue to see a significant increase in new cases of thyroid cancer in children and adolescents in Fukushima," Dr. Rosen concludes. The official figures "are likely to be a systematic underestimation, as became apparent by the newly published thyroid cancer cases diagnosed outside the study protocol."



ONLINE:

https://tinyurl.com/ycuylgyc

### We cannot afford another global health crisis



"We've been living under the threat of a global health crisis triggered by nuclear war for decades," the doctors asserted. "But nuclear weapons are not a virus: we have the solution to get rid of them and we need to act before it's too late....

"There is a critical difference between a pandemic and a nuclear war. We already have the tool to stop nuclear weapons. It's called the Treaty on the Prohibition of Nuclear Weapons and it was adopted in 2017 at the United Nations by 122 countries. Today 81 countries have signed it and 36 have ratified. The World Medical Association in 2018 welcomed the TPNW and called on all states to promptly join and implement it.

"Health professionals are clear:

there is no way for us to adequately respond to a nuclear war. Our only solution is to work together as a global community to prevent one. The choice of nine countries to keep nuclear weapons puts us all at risk.

"Doctors and nurses are overwhelmed responding to the global health crisis we are already facing. We cannot afford to take on another one, not least one that we have the power to prevent. Responsible nations must join the Treaty on the Prohibition of Nuclear Weapons, taking collective global action for the health of our people and our planet."

The IPPNW leaders who co-signed the statement were Jans Fromow Guerra (Mexico), Ira Helfand (US), Åsa Lindström (Sweden), Ruth Mitchell (Australia), Arun Mitra (India), Sally Ndung'u (Kenya), David Onazi (Nigeria), Tilman Ruff (Australia), and Carlos Umaña (Costa Rica).



ONLINE: hhttps://tinyurl.com/yar6ag9f



Dr. Peter Buijs (left), chair of IPPNW's Netherland's affiliate the NVMP Physicians for Peace, led the organization to mark its 50<sup>th</sup> anniversary by bringing together international peace and disarmament experts at The Hague Peace Palace to address two major existential threats: climate change and the use of nuclear weapons. Dr. Buijs was awarded the Dutch Royal Medal of Honour for civilians and was appointed an Officer of the Order of Orange-Nassau.

### "We achieve great things together" An interview with IPPNW chair Bjorn Hilt

Dr. Bjorn Hilt, a senior consultant and professor of occupational medicine at the St. Olav University Hospital in Trondheim, Norway, is the chair of IPPNW's board of directors.

VS: Why did you become involved with the Norwegian affiliate of IPPNW?

BH: I inherited the opposition to nuclear weapons from my parents, who had actively rallied against nuclear weapons starting in the 1950s, and who brought their children with them. I remember from my early childhood a book in our house with impressive drawings by the children of Hiroshima. Therefore, it was an easy decision for me, as a young doctor, to join the newly started Norwegian affiliate of IPPNW in 1982. At that time I had small children and could only be moderately active until 1998, when I became a board member, which I have been ever since, including six years as the leader of the affiliate.

VS: What is different about this organization that has kept you active for so long?

BH: In my professional work I am a consultant and a university teacher in occupational medicine which is a discipline that deals with the prevention of occupational diseases and injuries. For me the prevention of nuclear war is an imperative and also the ultimate preventive medicine. If we don't succeed in that, everything else in medicine, and in life, becomes near to meaningless. What keeps me going are the collaborations with fine colleagues who have also become friends as we do this work together.

VS: You have been chair of the board for 14 years now. How do you think the federation has developed over that time?



Photo: Steve Lipofsky

BH: Because of our critical mission, IPPNW, in my view, is the most important organization there is. It has been a great privilege to work on the board through so many years with IPPNW leaders from every region of the world. The medical students and young doctors who engage in the movement are a great and constant inspiration. It is a wonderful thing to be allowed to work together with good colleagues and friends to save the world.

VS: How have you balanced your work with IPPNW, your medical career, and your personal/family life? What advice would you give to medical professionals who are interested in joining this effort but don't know if they have the time?

**BH:** I feel fortunate to have a wife who is almost as opposed to nuclear weapons as I am.

VS: Almost?

BH: At home she makes a joke saying that when I retreat to my working room in the evenings doing IPPNW work, she at least knows what I am up to. I am grateful for her support. For my professional career I feel that the IPPNW work has been more an inspiration than an obstacle. I believe that you become a better

doctor and a better teacher if you engage in matters that are bigger and more important than only your personal pursuits. It is also my experience from IPPNW that if we all do a little, and some of us at times a little more, we achieve great things together. In IPPNW we are always grateful for every contribution.

**VS:** Can you tell us about your vision for IPPNW's role in the global disarmament movement in the next few years?

BH: I have a dream that the imperative to prevent nuclear war will become history in a not too far future, namely when all nuclear weapons are abolished. Until that happens IPPNW must continue to be a strong medical voice pointing at the absolutely catastrophic humanitarian impact that any use of nuclear weapons means. In that situation I am thrilled and satisfied to see the new generation of medical students and young doctors who are more



than able to continue the work as leaders of the organization. In my view there will always be a need for an organization of dedicated physicians for global responsibility working for peace, disarmament, and a sustainable human development.



### IPPNW endorses UN Secretary-General's ceasefire appeal

As COVID-19 overtakes the world, the interconnectedness of our modern human family has never been clearer. Hopefully, more people and world leaders will now come to understand what IPPNW has long advocated: working proactively to prevent threats to global health and survival, rather than waiting to respond to the next pandemic or the use of nuclear weapons, is imperative. It is time to end the diversion of resources to militarism and war, and the stationing of thousands of civilization-ending nuclear weapons on 24-7 hair-trigger alert. It's time to prioritize social investments that promote and protect human health and wellbeing. IPPNW adds it's full-throated endorsement to the UN Secretary General's call for a global ceasefire in order to conquer coronavirus. "End the sickness of war and fight the disease that is ravaging our world. It starts by stopping the fighting everywhere. Now."

### IPPNW joins with world youth at online global assembly

On May 2, as part of IPPNW's growing youth initiative, hundreds of young people from around the world joined the online "World Conference: Youth Assembly," a joint project between IPPNW, New York State Peace Action, PEAC Institute, Soka Gakkai International, Nuclear Age Peace Foundation, Amplify, and many others.

Participants gained insights on the humanitarian consequences of nuclear weapons, the climate crisis, and racial and economic justice, with a specific focus on how to build movements in the era of COVID-19 and beyond. Among the outstanding group of participants, panelists, and moderators were IPPNW medical students Kelvin Kibet and Franca Brueggen, and Central Office youth coordinator Molly McGinty.

Keep an eye on IPPNW's website and social media pages for a recorded video of the event.









**IPPNW** is a non-partisan federation of national medical organizations in 62 countries dedicated to safeguarding health by working to ban nuclear weapons and to address the impact of militarism and war on human health.

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### World Congress in Kenya Postponed

The 23rd IPPNW World Congress in Mombasa has been temporarily postponed due to the COVID-19 public health pandemic and its impact on global travel restrictions. The International Organizing Committee and the IPPNW Executive Committee will set new dates for the Congress as soon as possible, given the extent and uncertainty of the current situation. Watch IPPNW's website and social media platforms for updates about the schedule, program, and practical arrangements.

#### We Need Your Help!

The COVID-19 pandemic is also having a significant impact on IPPNW's finances. We are hurting as our community of supporters, understandably, has been focused on the crisis at hand. We've only been managing because we have the leanest operation possible, but further cutbacks may be necessary without your support. (To put it into perspective, the Pentagon spends the equivalent of IPPNW's total annual budget every 15 seconds!) Your donation today will allow IPPNW to persevere through this bleak time and continue our work to prevent the greatest catastrophe of all.

Please contribute at: ippnw.org/donate.html







