to be more important than actual risks. For example, steam and chemical burns and heavy load drops are real events that have occurred and caused serious injuries. These are real issues rather than the imagined benefits derived from LNTH/ALARA.

Jeffry A. Siegel, Charles W. Pennington, and Bill Sacks should be applauded for illustrating the LNTH fallacy. Hopefully, their work will cause professionals to challenge poor science and use radiation and radioactive materials to their full potential.

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Joseph John Bevelacqua
Bevelacqua Resources
343 Adair Dr.
Richland, WA 99352
E-mail: bevelresou@aol.com

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TO THE EDITOR: Thank you for publishing the Special Contribution entitled "Subjecting Radiologic Imaging to the Linear No-Threshold Hypothesis: A Non Sequitur of Non-Trivial Proportions," which appeared in your January issue (*1*). Siegel, Pennington, and Sacks have produced a comprehensively researched, timely review of evidence that deserves wide dissemination. I hope it is read and understood by all members of regulatory bodies.

As a diagnostic radiologist I have been frustrated for many years by the incomplete, overly simplistic approach of the linear no-threshold (LNT) hypothesis. Administratively convenient and currently politically acceptable it may be, scientifically accurate it is not. Attempts to discuss with colleagues the LNT hypothesis, and the "as low as reasonably achievable" (ALARA) strategy that follows from it, have invariably produced a resigned shrug of the shoulders and a "we can't change the regulations so you might as well accept it" type of comment.

Well, let's review and hopefully change the regulations. And while we're at it, can we persuade our regulators to become a little more positive in their outlook? The "it's-all-nasty-stuff" atmosphere promulgated by LNT is depressing, ignoring as it does the incalculable benefits of radiation, particularly in the low-dose diagnostic range. Can I suggest that the International Commission on Radiological Protection (ICRP) be rebranded? Perhaps ICRE—the International Commission on Radiologic Education? Just a thought.

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Christopher Feltham
Diagnostic Radiologist (Retired)
E-mail: cfeltham@xtra.co.nz

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TO THE EDITOR: Allow me to refer to the article by Jeffry A. Siegel, Charles W. Pennington, and Bill Sacks entitled "Subjecting Radiologic Imaging to the Linear No-Threshold Hypothesis: A Non Sequitur of Non-Trivial Proportion," which was published in *The Journal of Nuclear Medicine* this January (*1*). I would like to congratulate your journal for its courage to present a platform for engagement in the controversy regarding low-dose–associated health risks and benefits from radiologic imaging. The medical community at large, not only the nuclear medical physicians and radiologists, should be delighted to read this superb review and conclusion. The widespread fear of low-dose radiation has brought on serious negative impacts on public health and socioeconomic development. The fear creates huge expenditures to avoid radiation exposure even at low doses at which detrimental health effects are not observed. The article by Siegel at al. should serve for teaching students. One should hope that the current discourse with the wealth of new data will lead to further research to fully unravel the mechanisms that underlie the facts of low-dose–induced protection against damage, be it radiogenic or nonradiogenic. A ratio of 1 between the amounts of radiation-induced damage and of radiation-induced damage prevention in the exposed system signals zero system response; a hormetic system response is the result of this ratio being below 1. National and international protection advisers and officers hesitate to accept the new biologic data but will eventually follow the best of science.

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Ludwig E. Feinendegen
Heinrich-Heine-University
Wannental 45
88131-Lindau, Germany
E-mail: feinendegen@gmx.net

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