

Glioblastoma in Vietnam War Veterans and DU: a Major Example of Brain Contamination Through Inhalation – and General Lessons of depleted Uranium study and Similar Issues for Nephrology

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Abstract

This paper makes a summary on the Vietnam War veterans and their particular pattern of cancer; it explains this pattern with earlier work of the author. Lessons for nephrology are drawn from the general research of the author on uranium in internal contamination.

Key words: alpha emitters; airborne radioactive dust; glioblastoma; brain tumors; health physics; kidney injury; kidney disease; uranium; depleted uranium; NORMs; thorium

Introduction

The Linebacker raids were the first large-scale use of depleted uranium in warfare. The use of depleted uranium had been tested by Northrop Corporation's « radiation committee » during the mid-1960s and it had been decided by the highest US authorities, certainly Richard Nixon himself to drop it onto North Vietnam as a way to inflict a long-lasting penalty to the Communist insurgency, in a carpet bombing fashion, in early 1972 after last tests in New Mexico. See [1] for details on what was blamed epidemiologically on pesticides (Agent Orange) in later times.

The manipulation of the first depleted uranium bombs, that were leaking some depleted uranium (this is visible on archive images, the photon break effect from the shuriken effect (a physical phenomenon described in [2]) is perceptible altogether with the quite rapidly and unsolidly welded nature of the bombs, predictable in a context of rapid fill-up and line production of the bombs) caused a contamination that is the main cause of the glioblastoma reported massively by Vietnam War veterans. The tail soldiers in the cockpit of the bombers (gunning back for defense measures against interceptors) were particularly covered in that dense material of a thin, easily incorporated nature that, with its slight alpha decay can reach in particular the brain if anions have accumulated in the brain ; eating salty causes such an effect (compare with [3]). This was predictably the case in particular in Thailand's U-Tapao airbase were

Asian food was obviously served (also as part of the discovery of the local culture by soldiers abroad) and in general in « lurps » Chicken with Rice and Beef Stew also present the perfect opportunity for salty meals.

The travel of depleted uranium through nerves to the brain was already proven [4]. It is also clear that as planes flew usually quite low and were slowed down by the weight of the load (explaining the massive complaints of the soldiers after the « unusual pattern of flight » during the Hanoi December 1972 « Christmas raids », and the shooting down of some bombers) some DU dust catapulted by the explosions also came back on the planes. This is more visible on the hull of the bomber in the below document taken from HistoryNet, with also the shuriken effect causing atypical darkening, especially at the front and on the tail. The set of bombs closest to the photograph is leaking depleted uranium (the four bombs to the right in that front line, and to a lesser degree the right of the penultimate line). Soldiers had several exposure opportunities, in airbases where work involves mathematics and computation for loads, prediction of flight paths etc stimulating neuronal work in a tense nervous position under battle pressure and so with contamination of the central nervous system and activation of several areas of the brain explaining the multiform nature in the veterans' typical glioblastoma. It explains the intrication of the DU in the brain and the quasi impossibility to excrete. Another factor also has to be weighted: with the positive charges depleted uranium nanoparticles will systematically adopt a mosaic pattern because

too much accumulation in a single point is opposed to their positive charge; this occurs in a lesser degree than with other actinides because of the low radioactivity but remains a phenomenon to take into account (see also [5]). The rapid movements of aircrafts because of winds and later

sports demanded on soldiers as training on the camp also certainly contributed somehow to the diffusion of DU nanoparticles across the brain system.

HISTORYNET

Search topic,event,group,period of time or location...



A sprawling arsenal, ready for another BUFF trip “downtown”—to Hanoi. (U.S. Air Force)

The account of kidney injury as a main result of internal contamination with uranium resonates entirely outside of the major set of data studied by the author. This organ indeed is one of the least exposed to injury from internal contamination – this is observed through massive WHO DALYs datasets for instance, compare with [1][6] and [3], these results were spun out of a larger selection of diseases and kidney disease was surveyed by the author systematically through that process yet yielded no significant increase anywhere in countries bombed with depleted uranium weapons. The kidney is an organ pouring out uranium and other alpha emitting nanoparticulates from the blood in urine. It is a direct result of natural adaptation to soil dust NORMs and volcanic tephra alpha emitters over more than a hundred million years of evolution certainly and even more.

Reading [7] is also interesting for another set of diseases linked with alpha emitting nanoparticulates. It shows as well a varsity that corresponds to the usual varsity of syndromes in Gulf and Balkan War veterans, but does not include the kidney.

It is obvious that the results of kidney damage from uranium come from military medics studying the use of DU in tank ammunition only. Tank crews seated with the motor and gear somehow under them handle ammunition to the cannon and the radiation at impact together with the motor's heat create, from the ^{238}U atoms scattering from the outer layers of the arrows, an internal contamination (inhalated or directly entering through skin pores) that can go to the bladder to then, through the

radiation's push on the atoms (see [2]) rise into the kidney in a process somehow similar to primary biliary cholangitis (especially because the DU arrows have accumulated into the tank and have not been fired) [8]. Likewise for instance in studies done on weapons shooters in the Sauclières tunnel, and in similar cases of land-based horizontal shooting ranges where the radiation feedback creates such a pushback into the kidneys. These very particular cases have been used as main frame and transferred onto the public for systematic research of the DU in kidneys. It created a tragic conundrum.

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