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Eye lens radiation exposure in Greek interventional cardiology personnel

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Introduction (1)

- Eye lens:
- > Tissue with high radiosensitivity in the human body
- Exposure to ionizing radiation ⇒ radiation-induced cataract risk
- Occupational annual dose limit (ICRP) = 20mSv from 150mSv
- ➤ High occupational ocular doses ⇒ Interventional Cardiologists
- ➤ Reduction of ocular doses ⇒ radioprotective lead glasses







Introduction (2)

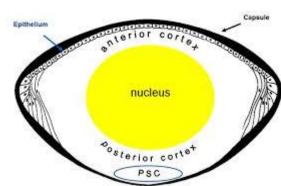
- Radiation-induced cataract:
- 1. Nuclear
- 2. Cortical
- 3. Posterior subcapsular (most associated with radiation-induced cataract)





Comparison of eye examination images with reference photographs





Methods (1)

44 Interventional Cardiologists (ICs) from Athens > 40 years old with more than 4 years experience



Epidemiological/Medical + Occupational questionnaires developed within the ELDO project



Slit-lamp + Scheimpflug eye examinations



LOCS III grading of lens opacities



Eye dosemeters for the eye doses evaluation





Methods (2)

22 unexposed (control group) to radiation individuals > 40 years old

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Epidemiological/Medical questionnaire



Slit-lamp + Scheimpflug eye examinations



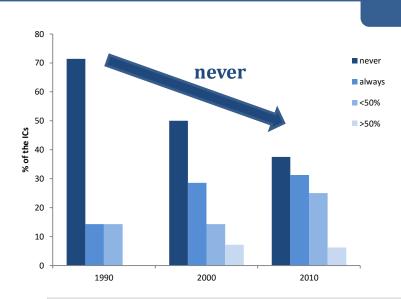
LOCS III grading of lens opacities



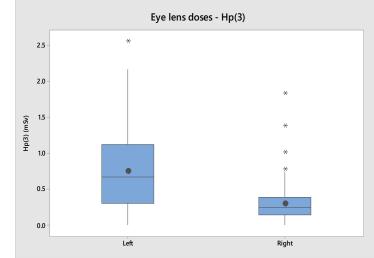


Results (1)

- Use of lead glasses:
- ➤ Great improvement through the decades (from 1990)



- Eye lens doses(from eye dosemeters):
- ➤ Haemodynamists (CAs, PTCAs, etc.)
 - ⇒ higher left eye doses
- Electrophysiologists (PMs, RFCAs, etc.)
 - ⇒ higher right eye doses





Results (2)

Eye lens doses(from eye dosemeters)

Left eve:

max monthly Hp(3) \Rightarrow 2.56mSv mean monthly Hp(3) \Rightarrow 0.76mSv annual Hp(3) \Rightarrow 9mSv

Right eye:

max monthly Hp(3) \Rightarrow 1.84mSv mean monthly Hp(3) \Rightarrow 0.3mSv annual Hp(3) \Rightarrow 3.7mSv

Estimated annual doses < annual dose limit of 20mSv

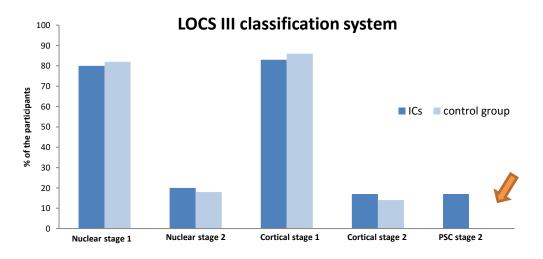
(based on the measurements and data from the questionnaires)





Results (3)

Lens Opacities Grading (LOCS III)



- ➤ Nuclear and cortical cataract ⇒ common for both groups
- ➤ 4 ICs detected with early PSC opacities

 **Probable causes:*

 Higher workload, longer fluoroscopy time, rare use of lead glasses

Conclusions

- The doses to the eyes of ICs can be significant
- Eye dosemeters help to the assessment of cataract risk
- Use of radioprotective glasses is highly recommended
- Training on radiation risk and protection is encouraged





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