Dr. TAPE. As I said, the initial reference levels have tried to take into account that for medical purposes one does have this somewhat average value that you would expect him to be receiving.

Mr. DADDARIO. Dr. Lieberman, doesn't this get us back to our earlier discussion. Because we are operating on information that we are confident about but which is not absolutely precise, that we ought to in all of these areas, including radiation, do the amount of research necessary to be able to come to determinations as quickly as possible.

Dr. LIEBERMAN. I certainly think it is important that we do this research, Mr. Chairman. As I indicated, extensive work is going on. However, and this is a personal belief, I think we know a lot more about radiation and its potential effects and what to do about them than a lot of other things that we do not know very much about.

My wife, for example, is an avid coffee drinker and, if I were to ask the question "Well, is all the caffein you are taking in—does it have any carcinogenic possibilities?" I don't know whether it is known. I recall a statement made, I think it was by Dr. George Beadle, the geneticist, who is presently in Chicago, I believe, and was chairman of a group that the National Academy of Sciences had—Dr. Wolman can remember this—on the biological effects of atomic radiation. Dr. Beadle—I think he is the one—said that we are in beter shape in terms of assessing the potential effects and how to control them in connection with radiation than many other things that we accept on a daily basis. Now, once again, this does not mean that we should rest on our laurels. I think more work has to be done because of the unique aspects of this particular possible insult to use as human beings. So while I agree completely with your comment that this research has to be done to pin this down better, I am simply indicating that I think there does exist the basis for the rational development of this industry and its control.

Mr. DADDARIO. I find no disagreement with that. I think we are doing marvelously well. I think it is quite obvious that this is the situation. We are involved with a program which just a short while ago people could not even believe. It is now in a sense becoming a way of life. There is a tendency when this happens for us to accept things and to do less than we ought to. We do have regulatory controls which are imposed in this particular area and we, therefore, have an extra responsibility. We know it happens in any place where some heated water goes into a river, such as the Connecticut River. Everybody gets up in arms because they think of all the problems, not just those attendant to that emission, but they begin imagining everything else. This has a great effect on the whole psychological structure of an area.

I recognize your problems, and I do not in any way mean to be critical about what you are not doing. You are doing a great deal, but I do think it is important for us to understand that at a time when activities in this field become more and more commonplace and become accepted as a way of life, that is the time when it could be more dangerous.

Dr. LIEBERMAN. This is quite right, I fully agree with that. I think this in itself is justification for carrying out the kind of research and development program that is being done.

Dr. TAPE. I also think that in all of these areas, not just the radiation area but in all of them, we are operating with what I call moving targets.