RADIOLOGICAL RISK ASSESSMENT OF DRINKING WATER FROM IGNATIUS UNIVERSITY QUARTERS

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4 5

6 Abstract

7 The presence of radionuclide in water constitute health risks to humans. Ingestion of such water 8 increases the likelihood of incurring cancer. Radiological risk analysis will enhance the detection of significant radionuclides and its associated health risk. The aim of this study was to assess the 9 10 natural radioactivity and its associated health risk in Tap water from university quarters of 11 Ignatius University of Education, Rivers State by means of gamma spectroscopy techniques and radiation models. The tap water was collected from residential quarters and class rooms and 12 chemically treated by adding nitric acid and then pre-concentrated further by evaporating to 13 14 certain levels. The residue were transferred to small cylindrical containers were kept sealed in order to ensure secular equilibrium between ²³⁸U, ²³²Th and their progenies for 28 days and 15 activated with thallium detector. The measured activity 16 counted with sodium iodide concentration of natural radionuclides such as ⁴⁰K, ²²⁶Ra and ²³²Th in drinking water were in the 17 range of 4.14 \pm 3.61 to 48.30 \pm 3.88 Bql⁻¹, BDL to 188.51 \pm 2.69 Bql⁻¹ and BDL to 29.17 \pm 3.42 Bql⁻¹ 18 respectively The specific activity concentration of ⁴⁰K, ²²⁶Ra and ²³²Th obtained were used to 19 20 estimate the annual effective doses for different age categories by taking into consideration the ingested dose conversion factors as well as their yearly average water consumption. The annual 21 effective dose due to ingestion of the sampled water were above the recommended values by 22 WHO. The paper presents the overview of the techniques used and the summary of the findings. 23 24 The result of this study gives the radiological baseline data for effective monitoring of drinking water in the study area. 25

26 *Keywords:* Radionuclide, Spectroscopy, lifetime cancer risk and hereditary effects.

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31 **1. Introduction**

Life will not survive on earth without water. It is the most important resources to man after air. 32 Various sources of water exists but the most accessible is that which is readily available to 33 34 individual community [1]. Ground water harnessed as dug or drilled well, boreholes, is the major source of water for homes and the entire university community of the study area. Humans are 35 constantly exposed to some levels of environmental radiation. According United Nations 36 37 Scientific Committee on the Effects of Atomic Radiation [2] about 87% of the radiation doses received by human are from natural sources while the remaining is due to anthropogenic 38 radiation. The natural source can be terrestrial or cosmic. The cosmic sources include radiations 39 40 from extra-terrestrial origin while the terrestrial sources naturally from air, water, soil, rocks and

building materials. The knowledge of natural sources of background radiation is the mostimportant and immediate concern to the general population [3].

Natural radioactivity has always been present and broadly distributed in the earth's crust and the 43 atmosphere, either as primordial radionuclides or uranium (^{238}U) and thorium (^{232}Th) decay 44 series and radioactive potassium (⁴⁰K) or as cosmic radiations that are produced constantly in the 45 atmosphere [3] in terms of radiation exposure, primordial radionuclide of ²³⁸U and ²³²Th decay 46 series and ⁴⁰K which has extremely long half-lives of great concern due to their gamma ray 47 emitting potential. The actual level of radiation caused by the radionuclide content of rocks and 48 49 soil varies widely from place to place and the actual background radiation contributes to the external gamma dose rate at a given location which can be determined by measurement. The 50 dose rate depends on the geological structure and geographical conditions and appears at 51 different levels in the soil of each region of the world [4, 5, 6]. Higher radiation levels are 52 associated with igneous rocks such as granite and lower level with sedimentary rocks; however, 53 54 some shale's and phosphate rock have relative high content of radionuclide [7].

Water is a vital resource to mankind provided by God. The availability of clean water sources 55 poses a problem to the present civilization and a concern to many researchers. Since water is 56 essential to sustain life, a satisfactory supply must be available to all, and the primary interest of 57 the World Health Organization to drinking water quality is to protect public health [8]. 58 Improving access to safe drinking water can result in tangible benefits to human health [9]. Since 59 water is an essential commodity to man, the quality of water ingested at every given time 60 determine our health status, completely removing of radionuclide in our tap water before 61 62 consumption, will probably reduce the cases of terminal diseases like cancer, cataract. The presence of radionuclide in drinking water poses health hazard when ingested into the body. 63 Dumping of industrial, medical and domestic waste such as phosphogypsum, alum, shale's, 64 scraps from oil and gas plant, waste from the hospital and discharge from nuclear fuel cycle, 65 seepage can contaminate the soil, surface and underground water resources[10]. 66

When water flows through rocks, soil cracked cement surrounding a water source; it can pick up 67 radioactive materials, thereby contaminating the water source [11]. The predominant 68 radionuclide found in water include radium (and its decay products) Uranium (and its decay 69 products) radon (and its decay product), thorium (and its decay product). Natural radionuclide 70 constitutes a treat to humans when ingested or inhaled in the body either through drinking water 71 and food chain [12]. The effect can be chronic such as Terminal Diseases, Acute leucopenia, 72 anemia, cancer [13]. Therefore, this work centered on the determination of the background 73 74 radiation exposure rate and measurement of radioactivity level in drinking water from the staff 75 quarters and class room with the aim of quantifying its radiological health implication.

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79 2. Materials and Methods

80 2.1 Study Area

81 Study Area

The study area is Ignatius Ajuru University of Education residential quarters and its environs 82 situated at Iwofe, Rumuolumeni in Obio/AkporLocal Government Area, Port Harcourt, Rivers 83 State, Nigeria. It is located at the central part of Niger Delta. The study area lies between 84 85 latitudes 4°45'N and 4°60'N and longitudes 6°50'E and 8°00'E. It lies in the tropical wet climate 86 zone, characterized by abundant rainfall with little dry season. The monsoon season occurs between April and October, bringing heavy rainfall ranging from 2000 to 2500 mm with 87 temperatures up to 25°C and a relatively constant humidity. Rumuolumeni is generally a lowland 88 89 area with average elevation below 30 meters above sea level. Its geology comprises basically of alluvial sedimentary basin and basement complex. The thick mangrove forest, raffia palms and 90 light rainforest are the major types of vegetation. Due to high rainfall, the soil in the area is 91 usually sandy or sandy loam. It is always leached, underlain by a layer of impervious pan. 92



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94 Fig.1: Map of the study Area

95 Rumuolumeni axis of Port Harcourt play host to the eagle cement. The main operation of this

96 industry involves the bulk importation of cement dust (clinker) through the new Calabar river, to

97 the jetty, the clinker will then be stored in the tank farms and then transferred into Jumbo bags

98 into the mixing machine in the ware house for proper blinding of the clinker with the shale ash and adhesive to form cement nous product, from the mixing unit it goes to the bagging machine 99 where the cement is package and ready to be distributed to industrial and domestic users. 100 Throughout this process, there will be constant emission of Co₂ as waste to the environment. The 101 102 processes of heating, blending of the raw materials together and bagging of the product, there will be continuous emission of dust as waste to the environment, since cement contains some 103 level of iron, aluminates and silicate component when introduce into the environment as waste 104 could degrade soil and underground water. Some of the operation takes place in ships berthed in 105 the river thereby degrading the surface water, farming, fishing and general buying and selling 106

107 activities also takes place.

108 2.3 Sample Collection and preparation

A total of 23 water samples were collected, twenty within the university campus and the other 109 110 three were collected outside the campus to serve as a control measure. At each sampling point, plastic containers of 1.5 litres were rinsed three times with the water being collected to minimize 111 contamination from the original content of sample container; the amount collected was such that 112 an air space of about 1% of container capacity was created for thermal expansion. Before 113 114 collection of water samples, the taps were first turned down to reduce turbulent flow and to reduce radon loss before collection. The water samples were immediately acidified with nitric 115 acid (HNO³) to reduce the pH and minimize the absorption of radioactivity into the walls of the 116 container [14]. Applying of nitric actually help to retain the element in the water from missing or 117 being deficient. The samples were tightly covered and taken to the laboratory to be processed, to 118 119 obtain equilibrium state for gamma spectroscopy. The samples were kept in marinelli beaker sealed. Sealed for one month, due to smaller life of the daughter radionuclide in the decay series 120 of ²³²Th and ²³⁸U the ²³²Th activity was determine from the average activities of ²⁰⁸Ti at 583 Kev 121 and ²²⁶Ac at 911 Key in the samples and that of ²²⁶Ra was determined from the average activities 122 of the decay product ²¹⁴Pb at 352 Key and Bi at 609 Key. The activity of ⁴⁰K was based on 1460 123 Kev peak [3]. 124

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126 2.3 Gamma Spectroscopy

A lead-shielded 76mm x 76mm Nal(TI) detector crystal (Model No. 802 series, Canberra Inc.) 127 coupled to a Canberra Series 10 plus Multichannel Analyzer (MCA) (Model No. 1104) through a 128 preamplifier was used for the radioactivity measurement. It has a resolution (FWHM) of about 129 8% at energy of 0.662 MeV (137Cs) which is considered adequate to distinguish the gamma ray 130 131 energies of interest in the present study. The photon emitted by them would only be sufficiently 132 discriminated if their emission probability and their energy were high enough, and the surrounding background continuum low enough. The samples were placed symmetrically on top 133 of the detector and measured for a period of 10 hours. The net area under the corresponding 134 135 peaks in the energy spectrum was computed by subtracting counts due to Compton scattering of higher peaks and other background sources. 136

After background correlation, the net area count in each photo peak was used to estimate thespecific activity concentration of each of the radionuclide in the samples using the relationship.

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$$A_s = \frac{Aa}{P\gamma E\gamma tc \frac{Ms}{Vs}} (Bq/kg)$$

Where A_s is sample concentration, A_a is net peak area of a peak at energy, E_{γ} is the efficiency of 140 the detector $\frac{Ms}{v_c}$ is sample mass, P_{γ} is the abundance of gamma line in a radionuclide and t_c is 141 total counting time. The specific activity concentrations of the parent nuclides were obtained 142 143 using their daughter nuclide specific activity concentration assuming attainment of secular equilibrium within the period of storage. Background measurement and efficiency calibration of 144 the system was made using ¹³⁷Cs and ⁶⁰Co standard sources from IAEA, Vienna, spectrum were 145 accumulated for background for 29,000s at ⁹⁰⁰v to produce strong peaks at gamma emitting 146 energies of ¹⁴⁶⁰Kev for ⁴⁰K, ⁶⁰⁹Kev of ²¹⁴Bi and all Kev of ²²⁸Ac. 147

148 3. Standard Radiological Risks Assessment

149 Standard radiation hazard indices were used to evaluate the effects of radiation doses on the 150 health of humans that are exposed to natural environmental radiation through ingestion and 151 inhalation [15]. The indices to be evaluated are discussed below.

The annual effective dose from ingestion of radionuclide in water samples was estimated on the basis of the mean activity concentration of the radionuclides. This was done for different age brackets. In this work the intake rates and dose conversion factors for the radionuclides based on the International commission on radiological protection [12] publication are used as presented in Table 1.

157 The annual effective dose from ingestion of ground water was computed by the following158 equation [13].

 $H_{ing}(w) = \sum DCF_{ing}(i)x A_{spi} x I$ (2)

DCFing is dose conversion coefficient of a particular radionuclide ith in Sv/Bq for a particular age category, Aspi is the specific activity concentrations of radionuclide ith in the water samples in Bq/l and I is radionuclide intake in litres per year for each age category.

In addition to the estimated annual effective dose, the cancer and hereditary risk due to low dose without any threshold dose known as stochastic effect were estimated using the ICRP cancer risk model [16]. Radiation risk to population result from exposure to low dose radiation are normally known as chronic risk of somatic or hereditary damage of human tissues, thus much emphasis is always placed on the reduction of these radiological risks to natural radiation.

168 The nominal lifetime risk coefficient of fatal cancer recommended in the 2007 recommendations 169 of the ICRP for members of the public is $5.5 \times 10^{-2} \text{ Sv}^{-1}$. For hereditary effects, the detriment

- adjusted nominal risk coefficient for the whole population as stated in ICRP [16] for stochastic effects after exposure at low dose rates is estimated at $0.2 \times 10^{-2} \text{ Sv}^{-1}$.
- 172 The risk to population was then estimated using the recommended risk coefficient in ICRP report
- and assumed 70 years lifetime of continuous exposure of population to low level radiation.
- 174 According to the ICRP methodology:
- 175 Cancer Risk = Total annual Effective Dose (Sv) x cancer risk factor (3)
- 176 Hereditary Effects = Total annual Effective Dose (Sv) x hereditary effect factor (4)

177 Table 1: Committed Effective Dose Conversion Factor (Sv/Bq) for members of the Public178 [16].

S/N	Radioisotope	Infant	Children (1-12yr)	Teenage (12-17)	Adult ≥ 17yr
		≤1yr			
1	²²⁶ Ra	4.7 E-06	6.2 E-07	1.5 E-06	2.8 E-07
2	²³² Th	3.0E-05	3.4 E-06	5.3 E-06	6.2 E-07
3	40 K	6.2 E-08	2.1 E-08	7.6 E-09	6.2 E-09
	Annual water	182.5 L	365 L	547.5 L	730 L
	consumption				

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181 **4. Result and Discussion**

The measured activity concentration of natural radionuclides such as ⁴⁰K, ²²⁶Ra and ²³²Th in 182 drinking water were in the range of 4.14 ± 3.61 to 48.30 ± 3.88 Bal⁻¹. BDL to 188.51 ± 2.69 Bal⁻¹ 183 and BDL to 29.17±3.42 Bql⁻¹ respectively. The mean activity concentration values ⁴⁰K, ²²⁶Ra 184 and 232 Th are 18.79±4.24, 27.55±5.99 and 17.79±2.89 Bql⁻¹ respectively as presented in Table 2. 185 The variation in the activity concentrations of ⁴⁰K, ²²⁶Ra and ²³²Th observed in these samples 186 indicate that their origins are not the same and that they came from different depths and pass 187 188 through different geological layers. Likewise this irregular distribution of activity concentrations of the selected nuclides in the water may depend on their contents in rocks and may strongly 189 depend on the physical and chemical properties of each water sample. 190

Comparing the results obtained in this work with results of other similar works, the activity 191 concentration of ⁴⁰K, ²²⁶Ra and ²³²Th in drinking water were higher than that obtained in 192 Cameroon mineral water by Ndontchueng et al., [17]. The mean activity concentration of ⁴⁰K 193 obtained in this study are lower than the activity concentration of ⁴⁰K, in dam reservoir water 194 obtained by Inikunle et al., [15] but the mean activity concentration of ²²⁶Ra and ²³²Th 195 $(27.55\pm5.99 \text{ and } 17.79\pm2.89 \text{ Bgl}^{-1})$ obtained in this work were higher than that obtained dam 196 water $(9.00\pm3.34 \text{ and } 7.13\pm2.63)$ by Inikunle *et al.*,[15]. This could be due to differences in their 197 sources or origin which depends on the geological component of the area. The activity 198

199 concentration of 40 K, 226 Ra and 232 Th in all the samples were higher than the WHO (2006) 200 recommendation value of 10, 1.0 and 1.0 Bql⁻¹ respectively as shown in figures 2,3 and 4..

The highest activity concentration of 226 Ra (188.51±2.69 Bql⁻¹) was recorded at AIT₂ which corresponds to staff quarter very close to Cement bagging industry and a large waste dump site. This might have contributed to very high value obtained. The mean activity concentration of 226 Ra (27.55±5.99 Bql⁻¹) obtained is higher than the mean values of 40 K and 232 Th (18.79±4.24 and 17.79±2.89 Bql⁻¹). This implies that this wide range of 226 Ra concentration is in relation to the geological structure and to the characteristics of the areas.

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Table 2: Specific Activity Concentrations of Radionuclide in Various Sampling Locations and its Radium Equivalent.

S/N	LOCATION	Specific Activity Concentration (Bqkg ⁻¹)				
		⁴⁰ K	²²⁶ Ra	²³² Th	Raeq (Bqkg ⁻¹)	
1	AIT ₁	12.21±5.32	15.41±3.85	17.87±2.54	41.90	
2	AIT_2	10.65 ± 3.73	188.51±2.69	28.45±3.08	230.01	
3	AIT ₃	9.31±4.05	34.08 ± 2.08	20.59±1.45	64.24	
4	AIT_4	38.04 ± 4.60	20.81±4.98	18.69 ± 3.06	50.47	
5	AIT ₅	10.42 ± 4.31	29.17±4.31	29.17±3.42	71.69	
6	AIT_6	9.31 ± 5.80	12.78±4.29	18.98±3.12	40.64	
7	AIT ₇	6.47±2.79	BDL	15.97±3.30	23.34	
8	AIT_8	14.36±5.54	34.08±2.46	9.74±2.94	49.11	
9	AIT ₉	24.62±3.21	34.90±2.24	13.36±3.95	55.90	
10	AIT_{10}	11.18±2.75	14.41±3.45	26.69 ± 3.45	53.44	
11	AIT_{11}	48.30±3.67	9.50±3.36	23.57 ± 2.32	46.92	
12	AIT ₁₂	6.47±3.68	BDL	BDL	0.50	
13	AIT ₁₃	47.51±4.25	24.25±3.12	BDL	27.91	
14	AIT ₁₄	32.52 ± 5.29	28.35 ± 2.54	13.26±2.67	49.82	
15	AIT ₁₅	48.30±3.88	16.06 ± 2.94	9.19±3.12	32.92	
16	AIT ₁₆	21.15 ± 5.18	37.36±2.94	9.19±3.12	52.13	
17	AIT ₁₇	1.74 ± 4.25	12.13 ± 3.85	23.7±3.16	46.15	
18	AIT ₁₈	14.36 ± 5.54	34.08 ± 2.46	9.74±2.94	49.11	
19	AIT ₁₉	10.79 ± 3.12	13.34 ± 2.58	23.7±3.16	48.06	
20	AIT ₂₀	14.89 ± 5.97	14.42 ± 4.00	23.98±2.16	49.86	
21	AIT_{21}	7.26 ± 2.86	61.94±4.01	26.14±2.16	99.88	
22	AIT_{22}	4.14 ± 3.61	13.34 ± 4.01	24.65 ± 3.43	48.91	
23	AIT ₂₃	26.20 ± 3.95	3.77±1.85	22.75 ± 2.94	38.32	
	AVERAGE	18.79±4.4.24	27.55±5.99	17.79±2.89		

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- Fig. 2: Comparison of activity concentration of ⁴⁰K with WHO standard



Fig. 3: Comparison of activity concentration of ²²⁶Ra with WHO standard





S/N	Location	Total Ann	ual effect	ive dose		Cancer I	Risk and	Heredi	tary
		(mSvy ⁺)	F		F	Effect in	Adult	SHE	FIHE
		E Infant	E Child	E Teen	Adult	X 10 ⁻⁴	$\frac{110^{-2}}{\times 10^{-2}}$	x 10 ⁻⁵	$\mathbf{x} 10^{-3}$
1	AIT ₁	111.19	25.76	64.56	11.29	6.21	4.35	2.26	1.58
2	AIT ₂	317.58	78.05	237.41	51.46	28.30	19.81	10.29	7.20
3	AIT ₃	142.07	33.34	87.77	16.33	8.98	6.29	3.27	2.29
4	AIT_4	120.61	28.20	71.48	12.89	7.09	4.97	2.58	1.80
5	AIT ₅	184.84	42.88	108.64	19.21	10.57	7. 40	3.84	2.69
6	AIT ₆	114.98	26.52	65.61	11.25	6.18	4.40	2.25	1.57
7	AIT ₇	87.51	19.86	46.37	7.26	3.99	2.79	1.45	10.16
8	AIT ₈	82.72	19.91	56.31	11.44	6.29	4.40	2.29	1.60
9	AIT ₉	103.36	24.67	67.53	13.29	7.31	5.12	2.66	1.86
10	AIT_{10}	158.61	36.47	89.33	15.08	8.29	5.80	3.02	2.11
11	AIT_{11}	137.74	31.77	76.40	12.83	7.06	4.94	2.57	17.96
12	AIT ₁₂	0.07	0.05	0.03	0.03	0.02	0.01	0.58	4.10
13	AIT ₁₃	21.34	5.85	20.11	5.17	2.84	1.98	1.03	0.07
14	AIT_{14}	97.28	23.12	61.90	11.94	6.57	4.59	2.38	1.17
15	AIT ₁₅	64.64	15.41	40.06	7.66	4.21	2.94	1.53	1.07
16	AIT ₁₆	82.6	20.02	57.44	11.89	6.54	4.58	2.37	1.67
17	AIT ₁₇	140.18	32.17	78.74	13.21	7.27	5.09	2.6	1.85
18	AIT ₁₈	82.72	19.91	56.311	11.44	6.29	4.40	2.28	1.60
19	AIT ₁₉	141.32	32.51	79.77	13.5	7.43	5.20	2.70	1.89
20	AIT ₂₀	14.38	33.14	81.49	13.86	7.63	5.34	2.77	1.94
21	AIT_{21}	196.33	46.51	126. 75	24.524	13.49	9.44	4.90	3.43
22	AIT ₂₂	146.48	33.641	82.501	13.9	7.65	5.35	2.78	1.95
23	AIT ₂₃	128.09	29.28	69.22	11.18	6.15	4.31	2.24	1.57
	Mean	110.07	25.918	68.435	12.85	7.07	4.95	2.57	1.80

Table 3: Annual Effective doses for different Ages and Estimated Cancer risks and
Hereditary Effects on Adult member of the Public

The annual effective dose due to ingestion of the sampled drinking water was estimated for 228 229 different age groups including infants, children, teenagers and adults considering their dose 230 conversion factors and annual ingestion rate of water as presented in Table 1 and using equation 2. The estimated effective dose for different age groups were ranged from 0.073 to 317.58 mSvy⁻ 231 ¹ for infants, 0.050 to 78.05 mSvy⁻¹ for children, 0.027 to 237.41 mSvy⁻¹ for teenagers and 0.029 232 to 51.46 mSvy⁻¹ for adults with mean values of 110.07, 25.92, 68.44 and 12.85 mSvy⁻¹ 233 respectively. It can be seen that radiation dose received by infants are relatively higher than that 234 received for children, teenagers and adults. The teenagers also received higher radiation dose 235 than children and adults. 236

WHO [18] recommended reference levels of effective dose for infants, children and adults corresponding to one year consumption of drinking water are 0.26, 0.2 and 0.1 mSvy⁻¹. The doses obtained in this present work are higher than the recommended reference levels and from radiation protection point of view, life-long consumption of the investigated water may pose significant radiological health risk.

In order to evaluate the radiation risk in adults due to ingestion of ⁴⁰K, ²²⁶Ra and ²³²Th in 242 drinking water, the ICRP methodology was adopted and the result shown in Table 3. The results 243 244 of the cancer and non-cancer risk components were evaluated from the estimated annual effective dose of the sampled water. The results of the evaluated fatal cancer risk to adult per 245 year in each drinking water ranged from 0.02×10^{-4} to 28.30×10^{-4} with the associated lifetime 246 fatality cancer risk of 0.01 x 10^{-2} to 19.81 x 10^{-2} . The evaluated lifetime hereditary effect to adult 247 per varied from 0.58×10^{-5} to 10.29×10^{-5} with the associated lifetime hereditary effect in 248 adult of 0.07 x 10^{-3} to 17.96 x 10^{-3} . 249

This means that the lifetime fatality cancer risk to adult approximately 19 out of 100 may suffer 250 from some form of cancer fatality and for the hereditary effect approximately 18 out of 1000 251 may suffer some hereditary effect. The negligible cancer fatality risk value recommended by 252 USEPA [19] is in the range of 1.0×10^{-6} to 1.0×10^{-4} (ie 1 person out of one million or 10,000 253 suffering from some form of cancer fatality is considered trivial). Comparing the estimated 254 results of the lifetime cancer risk in the present study with the acceptable risk factor, it can be 255 concluded that all estimated results of the lifetime fatality risk in adult member of the university 256 population due to ingestion of radionuclides in the sampled water are higher than the range of 257 acceptable risk values recommended by USEPA. 258

259 **5.** Conclusion.

Radiological risk assessment of drinking water from Ignatius University quarters has been determined using gamma ray spectrometer. The activity concentration of ⁴⁰K, ²²⁶Ra and ²³²Th obtained in this study are higher than the recommended reference safe values. The annual effective dose estimated for different age groups showed that infants that ingest the sampled water are at higher risk than other age groups. The estimated lifetime cancer risk in adult member of the institution's population due to ingestion of radionuclides in the sampled water are above the range of the acceptable risk values recommended by USEPA.

From the findings of this work, we can conclude that tap water (drinking) in the University 267 quarters are not suitable for human consumption at its present state and may pose significant 268 radiological health risk related to its life- long consumption. Therefore, the management of the 269 institution should incorporation reverse osmosis technology or ion exchange technology in the 270 boreholes to reduce the radionuclide content of such drinking water. Furthermore the result of 271 this work serves as radiation baseline data of the area since no such work has been done in the 272 area and will help to monitor the radiological status of the drinking water of Rumu-olumeni 273 274 Community as a whole.

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