
Editorial

Wither Nuclear?

In this issue, Heslop and Westphalen review medical chemical, biological, radiological and nuclear (CBRN) defence in the Australian Defence Force.¹ The ongoing interest of militaries and non-state actors in these weapons, while waxing and waning over the last 100 years, continues, and requires appropriate military health preparations. While chemical, biological and, to a lesser extent, radiological weapons have received detailed attention, particularly since chemical weapons use in Syria, nuclear terrorism and nuclear war have received less attention. This may be based on the assumption that, with the exception of North Korea, these weapons are better controlled and less likely to be used. But, given recent tensions, are these assumptions valid?

Internationally, Australia and other countries are protected by a range of treaties designed to prevent the acquisition and use of nuclear materials and weapons, the most important of these being the Nuclear Non-Proliferation Treaty². Other treaties, such as the International Convention for the Suppression of Acts of Nuclear Terrorism, which came into force in July 2007, and the Convention on the Physical Protection of Nuclear Material, which came into force in February 1987, are also important in increasing nuclear materials security and preventing the export of nuclear material and related technologies.³ There are, however, serious challenges in these areas, with growing fissile material stockpiles in India, Pakistan, China and Japan.⁴

References:

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2. Department of Foreign Affairs and Trade, Australia's Uranium Export Policy, Commonwealth of Australia, Canberra, 2018 (Accessed on 12 August 2018 - <https://dfat.gov.au/international-relations/security/non-proliferation-disarmament-arms-control/policies-agreements-treaties/Pages/australias-uranium-export-policy.aspx>).
3. Burt R, Lodal J. The Next Step for Arms Control: A Nuclear Control Regime, *Survival* 2011; 53 (6): 51-72.
4. Allison G. Nuclear Terrorism: Did We Beat the Odds or Change Them? *Prism: Journal of the Center for Complex Operations* 2018; 7(3): 2-21.
5. Kibaroglu M. The Threat of Nuclear Terrorism Requires Concerted Action. *Strategic Analysis* 2014; 38(2): 209-216.
6. Biswas S. Nuclear desire: Power and the postcolonial nuclear order. University of Minnesota Press; Minneapolis: 2014.
7. Gale RP, Armitage JO. Are We Prepared for Nuclear Terrorism? *New England J Medicine* 2018; 378(13): 1246-1254.

Progress has been slower with other conventions. Bringing the Comprehensive Nuclear Test Ban Treaty into force would assist in reducing the numbers of nuclear weapons.⁵ Progressing the Fissile Materials Cutoff Treaty, first proposed in 2000, would also further restrict the availability of fissile materials and, ultimately, nuclear devices.⁶ Recent issues between Russia and the United States, however, have reversed some of the progress made with these treaties and will create further vulnerabilities. Alleged violations of the Intermediate-Range Nuclear Forces Treaty, no progress on the Strategic Arms Limitation Treaty, and plans for revitalisation of nuclear arsenals, including developing smaller tactical nuclear weapons, are also of concern.⁷ Closer scrutiny of this important area is required to ensure that we are better prepared for future conflicts.

Our first issue of 2019 contains a diverse range of articles from mental health and operational medicine through to infectious disease history. We continue to get a good range of articles, but other military and veterans' health articles are always very welcome and we would encourage all our readers to consider writing on their areas of military or veterans' health interest. We would particularly welcome papers based on our 2019 themes of recovery, rehabilitation and repatriation, but welcome any articles across the broader spectrum of military health.

Dr Andy Robertson, CSC, PSM

Commodore, RANR

Editor-in-Chief