

# **DEPLETED URANIUM WEAPONS : THE FORBIDDEN FILE**

A soldier stands in a corner of a street, in a city broken by the war. A child plays in a field near the debris of a fire truck. A farmer ploughs a land that has absorbed the dust of countless explosions.

What connects them is not only the memory of the conflict. It is something invisible that persists in the air they breathe, and the ground under their feet. It is the legacy of ammunition to the impoverished uranium.

These weapons have been used by some of the most powerful armies in the world, including the United States, the United Kingdom. Their impact zones are in Iraq, the Balkans, and other modern war theatres. The weapons strike with brutal efficiency, but their consequences are a silent and persistent poison.

The real extent of this contamination remains shrouded in official secrecy. When questions are asked about the long-term effects, on the health of civilian populations and military veterans, governments classify key documents as questions of national security. They control access to impact sites, making independent scientific verification almost impossible.

This confinement strategy is not accidental. It is a deliberate effort to manage the story, minimise risks, and avoid the responsibility for the devastating consequences that occur for years, even decades, after the end of the fighting. The truth is treated as a threat, a responsibility to manage rather than a reality to address.

This official secret creates a deep and dangerous void. In this void, victims, local doctors, and independent researchers who see the consequences firsthand, are engulfed. They document the disturbing peaks of rare cancers.

They are witnesses to the heartbreaking increase of congenital malformations in the areas strongly targeted by these ammunition. Their testimony paints a dark picture, which strongly contrasts with the sterile assurances issued by military spokespersons and government agencies. They speak of a public health crisis, which is taking place slowly, a crisis that is actively ignored by those who have the power to investigate and act.

While we are here today, on October 21, 2025, these weapons remain in the arsenals of several nations. The debate about their use continues, but it is a debate plagued by a lack of transparency. The entire history of uranium impoverishment is locked up in classified files, buried in restricted military zones, and silenced by political pressure.

The official line insists that there is no definitive proof of prejudice, a comfortable position, when the same authorities interfere with the collection of evidence. This is not a historical problem, it is a current and permanent danger. Silence itself is a weapon, a weapon that perpetuates suffering and guarantees that the real cost of war remains hidden from the public.

To understand the controversy, we must first understand the material itself. Uranium impoverishment, or UA, is the by-product of the process used to enrich natural uranium intended for nuclear reactors, nuclear weapons. This is what remains.

Because it is a waste, it is abundant and cheap for governments that have nuclear programmes. But this waste has a set of unique properties that make it very attractive for weapon makers. It is incredibly dense, about 1.7 times denser than lead.

This extreme density allows it to be transformed into piercing projectiles that can cross the heavy steel of a tank or a fortified bunker with terrifying ease. The destructive power of a UA shell is not limited to its ability to penetrate armour. When a uranium impoverished penetrator hits a hard target, it does something else.

It becomes what is called pyrophoric. The immense friction and heat of the impact make it ignite, creating a powdering of uranium metal in fusion and ceramic uranium oxide dust inside the target vehicle. This side effect ignites the crew and ignites the ammunition and fuel, ensuring the complete destruction of the target.

The fine dust and aerosol particles created by the impact, however, do not simply disappear. They settle on the ground, contaminate the ground and can be transported for miles by wind. It can be inhaled by anyone nearby, soldiers, cleaning teams, and especially civilians who return to live in these areas after the end of the conflict.

The particles are small enough to be deeply inhaled into the lungs. From there, they can penetrate the bloodstream. The contamination also infiltrates the phreatic tank, poisoning the wells and irrigation systems.

It is absorbed by plants, eaten by grazing animals and thus enters the human food chain. Contamination becomes a permanent characteristic of the environment, a radiological and chemical scar left on Earth. The use of these weapons is not limited to terrestrial combat.

The A-10 Thunderbolt 2, a formidable ground attack aircraft, often called the Warthog, is famous for its GAU-8 Avenger gun. This gun can fire thousands of 30mm per minute which many are equipped with impoverished uranium. When fired from the air, these cartridges spread a contamination to the UAE on a much larger area.

Faced with the growing alarm of independent scientists, a powerful counter-story has been built. The major international organisations have published reports. World Health Organisation, United Nations Environment Programme, International Atomic Energy Agency.

Their conclusions state that the radiological risk is low and that there is no conclusive scientific evidence linking the exposure to spectacular increases in cancer or congenital malformations. These reports serve as the basis for official defence. These official documents are used as a shield by the military.

Faced with the question, the US and UK defence ministries refer to these studies. They argue that the UAE ammunition is a legal weapon and conforms to international law. The language is carefully chosen.

Non-conclusive, no definitive link. This creates a loophole where the army justifies its actions by using reports whose access to data is controlled by it. It is a closed system of justification.

However, this official consensus is fiercely contested. Critics emphasise fundamental methodological gaps. Many studies were conducted years after the conflict, leaving time for radioactive dust to disperse or to be buried.

Access to the most contaminated sites has often been restricted. Destroyed tank columns, weapons storage facilities. The difference between official reports and ground evidence is striking.

Iraqi doctors in cities like Fallujah, Basra, have compiled exhaustive files, photographs, medical statistics of patients. However, this richness of clinical evidence is often rejected as a lack of rigorous epidemiological controls. Institutions responsible for protecting public health are accused of ignoring human evidence.

The truth seems to depend on who is allowed to tell it. The danger of impoverished uranium is a double threat that attacks the body on the chemical and radiological fronts, then. First of all, uranium is a heavy metal, lead and mercury.

When particles of the U.A. are inhaled and ingested, they travel in the bloodstream and accumulate in the vital organs. The kidneys are particularly vulnerable. They filter blood.

Over time, exposure can lead to renal lesions or a renal failure. Beyond its chemical toxicity, the U.A. is also radioactive, less than natural uranium, but emits alpha particles. Once lodged in the lungs, bones, these particles emit high-pitched alphas.

This internal exposure can damage the DNA of a cell. This is the most alarming aspect. Damaged DNA can lead to uncontrolled cellular growth.

This is the mark of cancer of many scientists. There is a link with high rates of cancer. If the DNA of reproductive cells, ovule sperm, is affected, mutations can be transmitted.

This could explain the increase of serious congenital malformations, without limbs, exposed organs, rare genetic disorders, which have been documented in places like Iraq. The impact can exceed a generation and extend over geological times. Uranium has a half-life of about 4 billion, 500 million years.

This means that the material will remain dangerous longer than human civilisation. The dust of decades-old wars remains in the ground and lifted by the wind. It is inhaled by children born after the fighting.

We have created permanent radiological sacrifice zones. The short-term official reports do not capture this reality. The refusal to recognise the extent of the crisis of uranium impoverishment does not stem from ignorance.

It is a calculated political strategy. Governments that have used these weapons have a powerful interest in controlling the story. Admitting that the ammunition at the U.S. causes long-term environmental pollution and serious health problems, would expose them to enormous legal and financial responsibilities.

This would mean accepting the responsibility to clean vast expanses of foreign territory. This would mean providing medical care, to life, to their own veterans, and to countless foreign civilians. The potential cost is stupefying, creating a huge incitement to denial.

To maintain this denial, the information is aggressively controlled. The day after the first Gulf War, the American army first denied having used the U.S. to admit later that they had fired hundreds of tonnes. Precise targeting maps that would allow health correlations are kept under wraps for national security.

This tactic effectively paralyzes independent research. Without these fundamental data, it becomes impossible to carry out large-scale studies. For years, the veterans of the Gulf, the Balkans and Iraq have been filled with a mysterious collection of symptoms.

Chronic fatigue, joint pain, respiratory problems, neurological problems. However, their efforts to obtain answers and treatments have often been welcomed with scepticism and bureaucratic obstacles. Their illnesses are attributed to other causes, easier to admit.

Where official channels fail, others have intervened to document the truth. Independent journalists, determined scientists, local activists have risked their safety to collect evidence in the heart of contaminated areas. Their work provides a powerful and disturbing counterpoint to the official stories to be skepticized.

They took soil samples from crater sites, showing concentrations of uranium hundreds, sometimes thousands of times higher, at the bottom level. They collected fragments of aluminium penetrators embedded in the twisted metal of destroyed vehicles. These are the raw data of a hidden disaster.

The visual evidence is even more visceral and immediate. Photography and videos of hospitals in Basra. Photography and videos of hospitals in Fallujah.

Difficult to look at, but necessary. Newborn with anencephaly. Child with gastrochisis.

Twisted limbs in an abnormal way. Tumour of small-faced figurines. Local doctors, overwhelmed, brandish these images as a call for help.

Independent teams have mapped these evidence, cut out with satellite images and disclosed documents, to identify hit areas and lands, and the peaks of health crises. Minutiae and underfunded efforts. A basic medical-legal science.

The time of ambiguity and denial has evolved. The evidence is too convincing to be ignored, both scientific and human. We must demand complete and unconditional transparency from the governments that have deployed these weapons.

This begins with the immediate declassification of all targeting data. The maps showing where each U.A.A. bullet was fired must be made public. It is not a question of compromising national security.

It is a fundamental requirement for public health. With this information, we will be able to understand the real extent of the contamination and direct resources to the most at-risk communities. We need epidemiological studies, on a large scale, truly independent, free of any military or political influence, carried out by international scientific bodies, with unlimited access to conflict zones, medical files and relevant governmental data.

They must focus on long-term health, civil population, veterans, victims' children, with an emphasis on genetic damage and transgenerational effects. The funding must come from the nations that have used these weapons, implemented by impartial experts. In the meantime, mark and seal the contaminated, informed and treated sites.

It is a call for truth and responsibility.