## Biological Effects of Low-intensity Radiofrequency Electromagnetic Radiation

Time for a Paradigm Shift in Regulation of Public Exposure













**Priyanka Bandara PhD (UNSW)**, Steve Weller BSc (Monash) Oceania Radiofrequency Scientific Advisory Association (ORSAA)



### **RF-EMR Exposure has Skyrocketed!**

Natural background RF-EMR: <10<sup>-15</sup> W/m<sup>2</sup>

100 – 200 m from Mobile Phone Base Station:

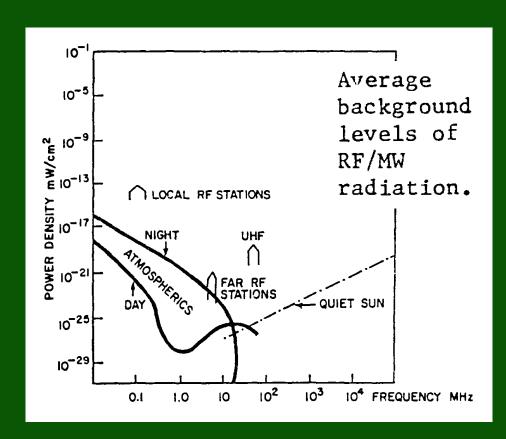
 $7.5 \times 10^{-2} \, \text{W/m}^2$ 

At 0.3m from a WiFi laptop :  $4.7 \times 10^{-2} \text{ W/m}^2$ 

ARPANSA standard:

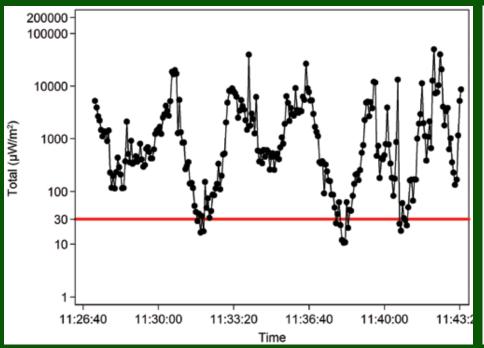
2 -10 W/m<sup>2</sup>

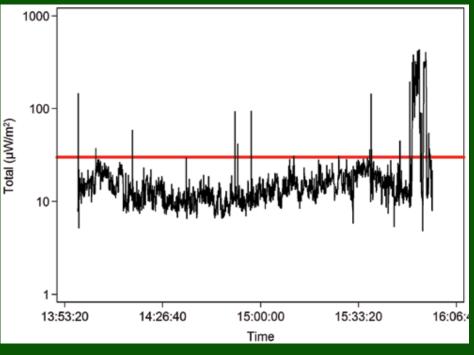
Bioinitiative recommendation:  $3 \times 10^{-5} \text{ W/m}^2$ 



Raines, J. K. Electromagnetic field interactions with the human body: observed effects and theories. National Aeronautics and Space Administration (NASA), Goddard Space Flight Center, Greenbelt, Maryland 20771 (1981), Fig. 3, pp 9.

### RF-EMR Exposure Varies by Orders of Magnitude





RF exposure ( $\mu$ W/m<sup>2</sup>) at Stockholm Central Station, Sweden. Mean exposure **2,817**  $\mu$ W/m<sup>2</sup> (2.8 x 10<sup>-3</sup> W/m<sup>2</sup>). Red line: exposure limit of 30  $\mu$ W/m<sup>2</sup> suggested by the Bioinitiative Report. 9 November 2015.

At the World Health Organization, Geneva, Switzerland. Mean **21.5**<u>uW/m²</u> (2.1 x 10<sup>-5</sup> W/m²).

3 March 2017.

EME Spy 200 exposimeter (88-5,850 MHz) used.

Hardell, L. Internat J Oncol. 51, 405-413, doi:10.3892/ijo.2017.4046 (2017)

## **Current Thermal Regulation of Public Exposure**

Australian Radiation Protection and Nuclear Safety Agency (ARPANSA) has set exposure standards (RPS3 - 2002)

- Based on 1998 guidelines of the International Commission on Non-Ionizing Radiation Protection (ICNIRP)
- Based on short-term thermal (heating) effects
- 6 minutes



SAM Head phantom

Stanadard Anthropometric Man



#### UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

WASHINGTON, D.C. 20460

JUL 16 2002

OFFICE OF AIR AND RADIATION

The FCC's current exposure guidelines, as well as those of the Institute of Electrical and Electronics Engineers (IEEE) and the International Commission on Non-ionizing Radiation Protection, are thermally based, and do not apply to chronic, nonthermal exposure situations.

that results from an increase in body temperature. The FCC's exposure guideline is considered protective of effects arising from a thermal mechanism but not from all possible mechanisms. Therefore, the generalization by many that the guidelines protect human beings from harm by any or all mechanisms is not justified.

Sincerely,

Norbert Hankin

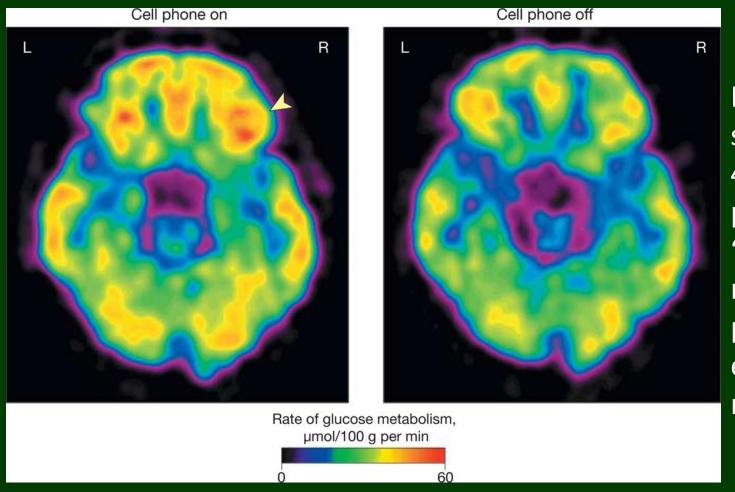
Center for Science and Risk Assessment

Radiation Protection Division

## No Scientific Consensus on "Safe Limits" of RF-EMR

- Exposure standards/guidelines vary between countries by up to 1000 times
- 225 EMF scientists from 41 countries have appealed to the WHO and the UN for biologically-based exposure guidelines – International EMF Scientist Appeal

## Mobile phone radiation alters brain glucose metabolism



NIH USA study 47 healthy participants. "on": 50 min mobile phone exposure on right side

Brain Glucose Metabolic Images Showing Axial Planes at the Level of the Orbitofrontal Cortex. Glucose metabolism in right orbitofrontal cortex was higher for the "off" condition (Volkow N et al., JAMA. 2011; 305(8): 808–813).

### Investigating RF-EMR Effects at Cellular and Subcellular Level

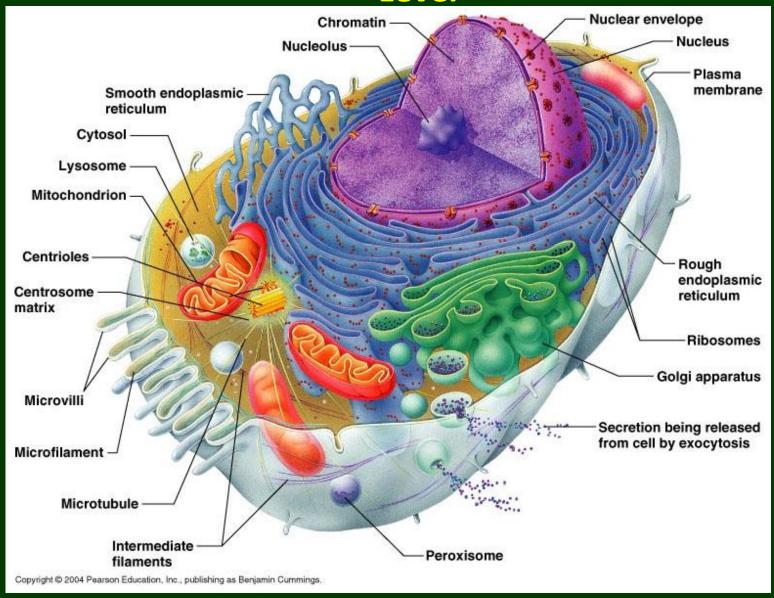
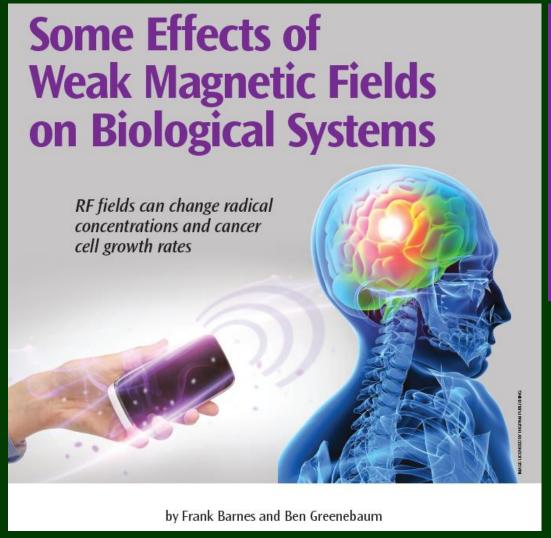


Image credit: Pearson Education Inc, Benjamin Cummings.

## Biological Effects Occur at "low intensity" Exposures

- Increase cellular Oxidative Stress
- Change membrane voltage-gated ion channels
- Alter gene expression mRNA, protein
- Genotoxic effects (DNA damage)
- Cell membrane damage blood brain barrier
- Metabolic, immune, hormonal disruption
- Sperm damage
- Neuro-behavioural problems
- Cancer initiation/promotion

### **Low-intensity RF-EMR Causes Oxidative Stress in Cells**



Damages, such as aging, cancer, and Alzheimer's, are associated with radical concentrations that are elevated for extended periods of time.

Emeritus Prof. Frank Barnes, Uni of Colorado, former Chair of Electronic Devices Society of IEEE, Vice President of IEEE publication activities.

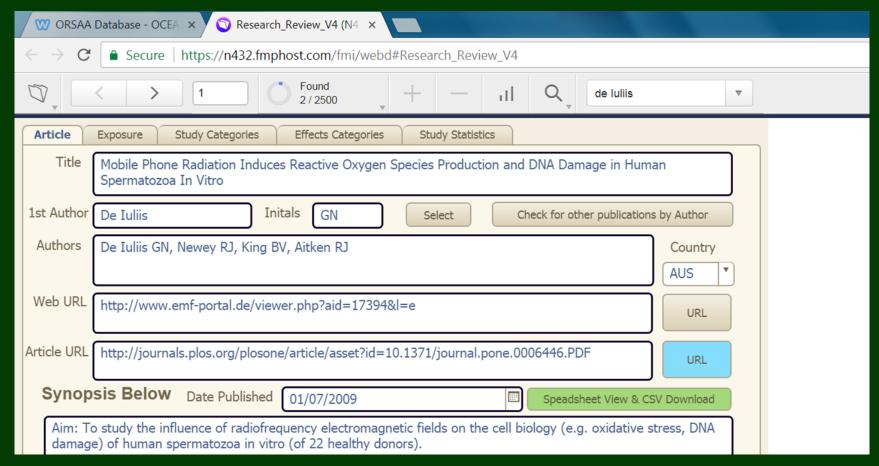
Emeritus Prof. Ben Greenebaum, Uni of Wisconsin-Parkside, former long-serving Editor-in-Chief of *Bioelectromagnetics* 

Barnes F and Breenebaum B. IEEE Power Electronics Magazine, March 2016: 60-68.

#### **Our Review of Oxidative Stress Studies**

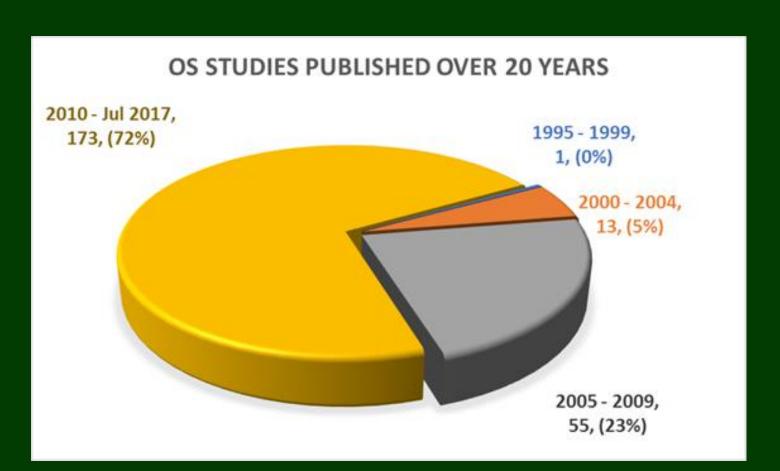


- Our database contains over 2400 studies at present (http://www.orsaa.org/resources.html)
- Analysed studies with endpoints related to oxidative stress 25
  July 2017



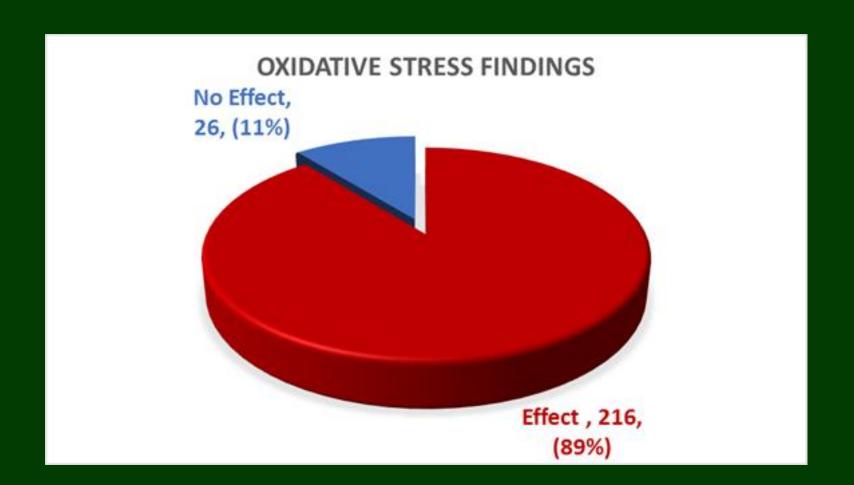
#### **Oxidative Stress Studies**

- 242 studies investigating OS
- Only one before the year 2000
- 55 (23%) between 2005-2009
- 173 (72%) since 2010



### Low Intensity RF-EMR Causes Oxidative Stress in Cells

- Review reported 93 out of 100 studies to find RF-EMR to cause Oxidative Stress (OS) Yakymenko, I. et al. Electromag Biol Med. 35, 186-202 (2015)
- We found 216 positive studies and 26 negative studies



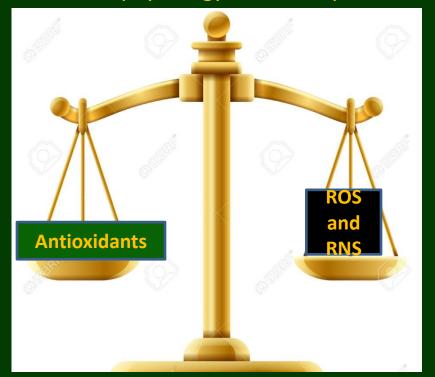
## Oxidative Stress Studies – Origin

- 242 studies done in 29 countries
- Australia only 1 studyEffect
- USA 7 out of 8 Effect
- China all 26 Effect
- India all 35 Effect
- Turkey 76 out of 80
   Effect

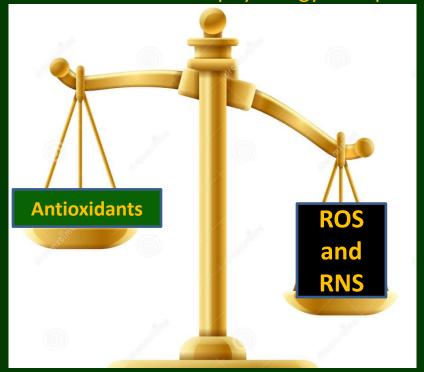
| Country       | Total #<br>Papers | Effect Papers | No Effect Papers |  |
|---------------|-------------------|---------------|------------------|--|
| Australia     | 1                 | 1             | 0                |  |
| Bulgaria      | 1                 | 1             | 0                |  |
| Brazil        | 6                 | 1             | 5                |  |
| Switzerland   | 2                 | 2             | 0                |  |
| China         | 26                | 26            | 0                |  |
| Germany       | 2                 | 0             | 2                |  |
| Egypt         | 9                 | 9             | 0                |  |
| Finland       | 3                 | 2             | 1                |  |
| France        | 2                 | 1             | 1                |  |
| Greece        | 2                 | 2             | 0                |  |
| Croatia       | 5                 | 5             | 0                |  |
| India         | 35                | 35            | 0                |  |
| Iran          | 11                | 11            | 0                |  |
| Israel        | 4                 | 3             | 1                |  |
| Italy         | 4                 | 2             | 2                |  |
| Jordon        | 1                 | 1             | 0                |  |
| Japan         | 1                 | 0             | 1                |  |
| Korea         | 8                 | 4             | 4                |  |
| Nigeria       | 5                 | 5             | 0                |  |
| Oman          | 1                 | 1             | 0                |  |
| Poland        | 4                 | 4             | 0                |  |
| Russia        | 4                 | 3             | 1                |  |
| Saudi Arabia  | 4                 | 2             | 2                |  |
| Serbia        | 5                 | 5             | 0                |  |
| Tunisia       | 4                 | 4             | 0                |  |
| Turkey        | 80                | 76            | 4                |  |
| Ukraine       | 3                 | 3             | 0                |  |
| United States | 8                 | 7             | 1                |  |
| South Africa  | 1                 | 0             | 1                |  |
| Total         | 242               | 216           | 26               |  |

#### Oxidative Stress and its Implications in Health

Normal cell physiology – Redox equilibrium



Oxidative Stress – cell physiology disrupted

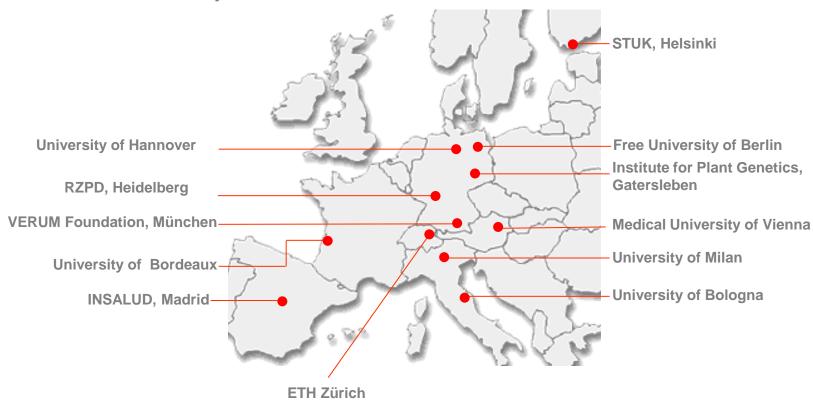


Maintaining the Redox Homeostasis is critically important for cellular health

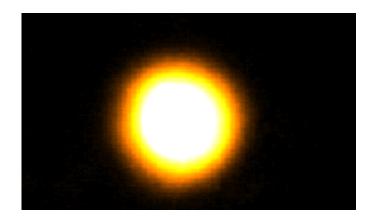
- >> disruption in favour of pro-oxidants causes oxidative stress
- >> direct damage to biomolecules and disrupt biological functions

# Risk Evaluation of Potential Environmental Hazards From Low Energy Electromagnetic Field Exposure Using Sensitive *in vitro* Methods

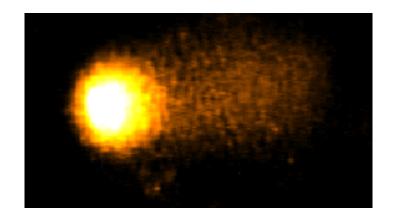
A project funded by the European Union under the programme "Quality of Life and Management of Living Resources", Key Action 4 "Environment and Health": QLK4-CT-1999-01574



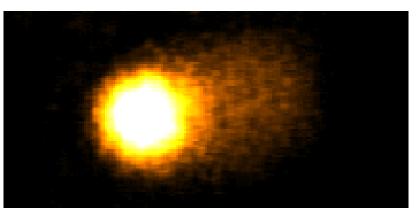
#### **DNA Damage Shown by Comet Assay**



sham exposure



gamma-radiation 0.5 Gy 1600 chest X-rays



RF-EMF: 1800 MHz; SAR 1.3 W/kg; 24h

Mobile phone 24 hr ICNIRP 2 W/kg

Diem E et al., Non-thermal DNA breakage by mobile-phone radiation (1800 MHz) in human fibroblasts and in transformed GFSH-R17 rat granulosa cells in vitro. Mutat Res. <u> 2005:583(2):178-83</u>

© Clinical Chemistry, Free University of Berlin

#### RF-EMR Can Damage DNA in Brain Cells in vivo

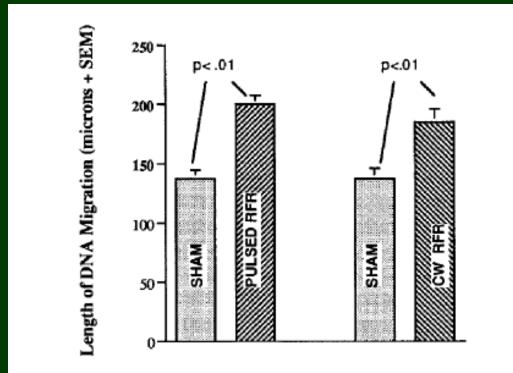


Figure 1. Single-strand DNA breaks in brain cells of rat after exposure to either pulsed- or continuous-wave RFR. Each bar represents data from eight animals (plotted mean + SEM).

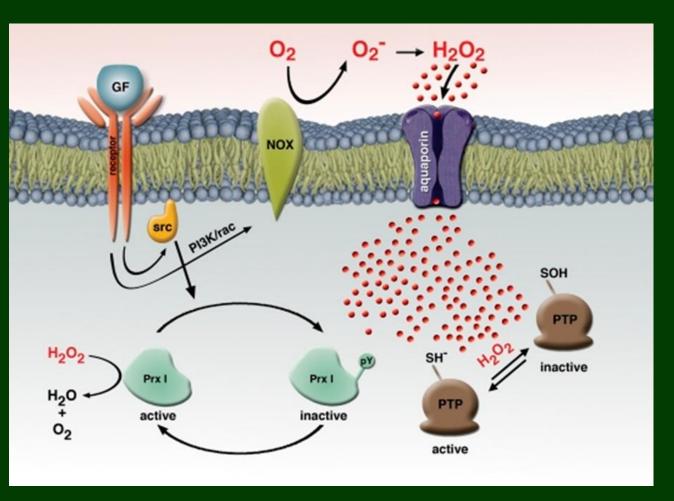
DNA breaks in brain cells of rats exposed to 2 hours of 2.45 GHz non-thermal RF-EMR at 1.2W/kg whole body exposure (pulsed or continuous waves) vs. sham exposure

Brains removed 4 hr after the exposure and DNA examined

Lai H. and Singh P., INT. J. RADIAT. BIOL 1996; 69(4): 513-521

**US National Toxicology Program confirmed DNA damage by RF in 2016** 

## ROS and RNS Mediate Cellular Signal Transduction AND Control Key Biological Functions



#### Critically important:

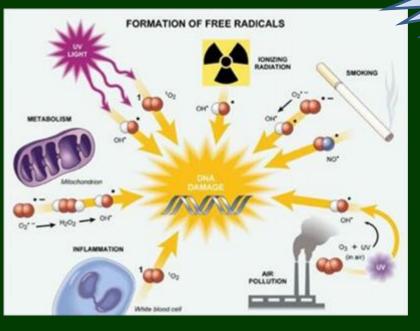
- concentrations
- location

#### Control:

- Metabolism
- Growth
- Immune functions
- Hormonal functions

Image: Finkel T. Signal transduction by reactive oxygen species. J Cell Biol. 2011 Jul 11; 194(1): 7–15.

#### **RF-EMR**

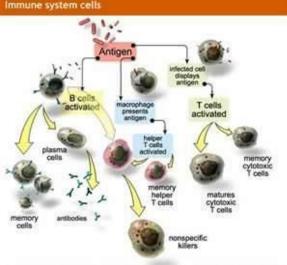


increased oxidative stress and resultant cellular damage



reduced Melatonin

reduced antioxidant protection



Immune dysfunction



**Multi System Dysfunction** 



**Chronic Disease** 

## RF- EMR Can Damage the Male Reproductive Cells

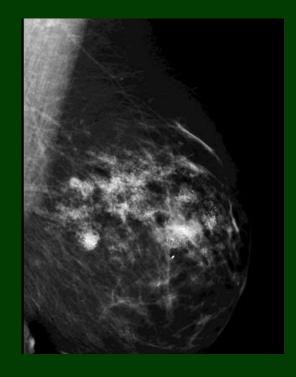


Houston et al., Reproduction. 2016 Dec;152(6):R263-R276. Epub 2016 Sep 6.

## **Mobile Phones May Cause Breast Cancer**









West JG et al.

Multifocal Breast Cancer in Young Women with Prolonged
Contact between Their Breasts and Their Cellular Phones.
Case Rep Med. 2013;2013:354682. doi: 10.1155/2013/354682.

## Low Intensity RF-EMR Causes Oxidative Stress

 ARPANSA claim "the putative link between RF energy and altered ROS production remains tenuous"\* is incorrect and risks public health

 ARPANSA should have assigned a team of cell biologists and clinicians experienced in oxidative stress research to conduct their review on *in vitro* and *in vivo* studies instead of relying on a single biophysicist with limited expertise.

\* ARPANSA TRS-164, pp7 (2014)

#### **Conclusion**

- There are biological/health effects at currently permitted RF exposures
- ARPANSA statement "The ARPANSA Standard is based on scientific research that shows the levels at which harmful effects occur and it sets limits, based on international guidelines, well below these harmful levels."\* is not supported by the scientific evidence.
- ARPANSA should take immediate measures to:
  - Reassess the scientific evidence on biological effects of RF-EMR
  - Set a new Standard based on biological effects, discarding thermally-based ICNIRP guidelines
  - Inform the Australian public of the potential risks
  - Educate the public on exposure reduction particularly of children
  - Advise the government to give preference to wired communication systems over wireless

<sup>\*</sup> ARPANSA Fact Sheet "Mobile Phones and Health"

## Additional Slides if needed for Q & A

## **RF-EMR Can Affect Foetal and Early Childhood Development**





The age of iPads, iPotties and iTeddies

## Neuro-behavioural problems are the leading cause of health burden on in young Australians

| Age group |     |                               |                              |                                     |                                     |                                     |                           |                           |                           |
|-----------|-----|-------------------------------|------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------|---------------------------|---------------------------|
|           |     | Under 5                       | 5-14                         | 15-24                               | 25-44                               | 45-64                               | 65-74                     | 75-84                     | 85+                       |
| Males     | 1   | Pre-term/lbw<br>complications | Asthma                       | Suicide/self-<br>inflicted injuries | Suicide/self-<br>inflicted injuries | Coronary heart<br>disease           | Coronary heart<br>disease | Coronary heart<br>disease | Coronary heart<br>disease |
|           | 2   | Birth trauma/<br>asphyxia     | Anxiety<br>disorders         | Alcohol use<br>disorders            | Back pain and<br>problems           | Lung cancer                         | Lung cancer               | COPD                      | Dementia                  |
|           | 3   | Other disorders of infancy    | Autism spectrum<br>disorders | RTI/motor vehicle<br>occupant       | Alcohol use<br>disorders            | Other<br>musculoskeletal            | COPD                      | Dementia                  | Stroke                    |
|           | 4   | SIDS                          | Conduct<br>disorder          | Depressive<br>disorders             | Poisoning                           | Back pain and<br>problems           | Diabetes                  | Stroke                    | СОРО                      |
|           | 5   | Other congenital conditions   | Depressive<br>disorders      | Asthma                              | Depressive<br>disorders             | Suicide/self-<br>inflicted injuries | Bowel cancer              | Lung cancer               | Prostate cancer           |
|           | 1/2 | Under 5                       | 5-14                         | 15-24                               | 25-44                               | 45-64                               | 65-74                     | 75-84                     | 85+                       |
| Females   | 1   | Birth trauma/<br>asphyxia     | Anxiety<br>disorders         | Anxiety<br>disorders                | Anxiety<br>disorders                | Other<br>musculoskeletal            | Coronary heart<br>disease | Coronary heart<br>disease | Dementia                  |
|           | 2   | Pre-term/lbw<br>complications | Asthma                       | Depressive<br>disorders             | Depressive<br>disorders             | Breast cancer                       | Lung cancer               | Dementia                  | Coronary heart<br>disease |
|           | 3   | Other disorders of infancy    | Depressive<br>disorders      | Asthma                              | Back pain and problems              | Back pain and problems              | COPD                      | COPD                      | Stroke                    |
|           | 4   | SIDS                          | Dental caries                | Suicide/self-<br>inflicted injuries | Other<br>musculoskeletal            | Anxiety<br>disorders                | Other<br>musculoskeletal  | Stroke                    | COPO                      |
|           | 5   | Cardiovascular<br>defects     | Upper respiratory conditions | Bipolar affective<br>disorder       | Asthma                              | Lung cancer                         | Breast cancer             | Lung cancer               | Diabetes                  |

Latest data from Australian Institute for Health & Welfare (2016 release)

## There is a Pandemic of Developmental Neurotoxicity

"To control the pandemic of developmental neurotoxicity, we propose a global prevention strategy"

Dr. Philippe Grandjean, MD and Dr. Philip J Landrigan, MD **Neurobehavioural effects of developmental toxicity.** Lancet Neurology: 14 February 2014

DOI: http://dx.doi.org/10.1016/S1474-4422(13)70278-3

#### **EMR Can Alter Brain Development & Behaviour**

In assessing the biological effects, it was found that behavior was the most sensitive biological component to RF/MW irradiation. It was observed that behavioral effects were

(Radiofrequency Microwave Radiation Biological Effects and Safety Standards: A Review. US Air Force Materiel Command, New York, 1994, p20).

- Pre/post-natal exposure to cell phones associated with behavioural problems and hyperactivity in children — Danish study on 13,000 mothers and children. (Divan HA et al., Epidemiology 2008;19:523-529)
- Prenatal exposure to cellphone radiation caused structural and functional deficits in the brains of mice - ADHD like behaviour (Aldad TS et al., Fetal Radiofrequency Radiation Exposure From 800-1900 MHz-Rated Cellular Telephones Affects Neurodevelopment and Behavior in Mice. Scientific Reports. 2012;2:312)
- Dr. Martha Herbert (Harvard Uni/Massachusetts General Hospital) Shows how EMR can contribute to autism (Herbert M and Sage C. Pathophysiology. 2013 Jun;20(3):191-209)
- EMR from cell phones alters brain waves (Loughran SP, Bioelectromagnetics. 2012;33(1):86-93; Leung S et al., Clin Neurophysiol. 2011;122(11):2203-16; Thomas S et al., Occup Environ Med. 2010;67(12):861-6; Croft RJ et al., Bioelectromagnetics. 2010;31(6):434-44;

#### Neuro-behavioural Symptoms Near RF-EMR Transmitters

#### **Mobile Base Stations**

- Spain Navarro et at., Electromag Biol Med 2003; 22;161-169.
- France Santini et al., Electromag Biol Med. 2003; 22;41-49.
- Poland Gadzicka E et al, Biuletyn PTZE Warszawa 2006; 14:23-26.
- Austria Hutter et al., Occup Environ Med 2006; 63:307-313.
- Egypt Abdel-Rassoul et al., Neurotoxicology 2007; 28:434-440.
- Germany Blettner et al., Occup Environ Med 2009; 66:118-123.
- Germany Berg-Beckhoff et at., Occup Environ Med 2009; 66:124-130.
- India Augner C, Hacker GW. Indian J Occup Environ Med. 2009; 13(3):141-145.
- Poland Bortkiewicz et al., Int J Occup Med Environ Health 2012; 25(1):31-40.
- Germany Eger H & Manfred J. Umwelt·Medizin·Gesellschaft, Feb 2010: 130-139.
- Spain Gómez-Perretta C et al., BMJ 2013; 3(12):1-7.
- Iran Shahbazi-Gahrouei et al., Electromagn Biol Med 2014;33(3):206-10
- India Gandhi G et al., Electromag Biol Med. 2015;34(4):344-54.

#### **Military Radar**

Cyprus - Preece et al., Occup Environ Med 2007;64:402–408.

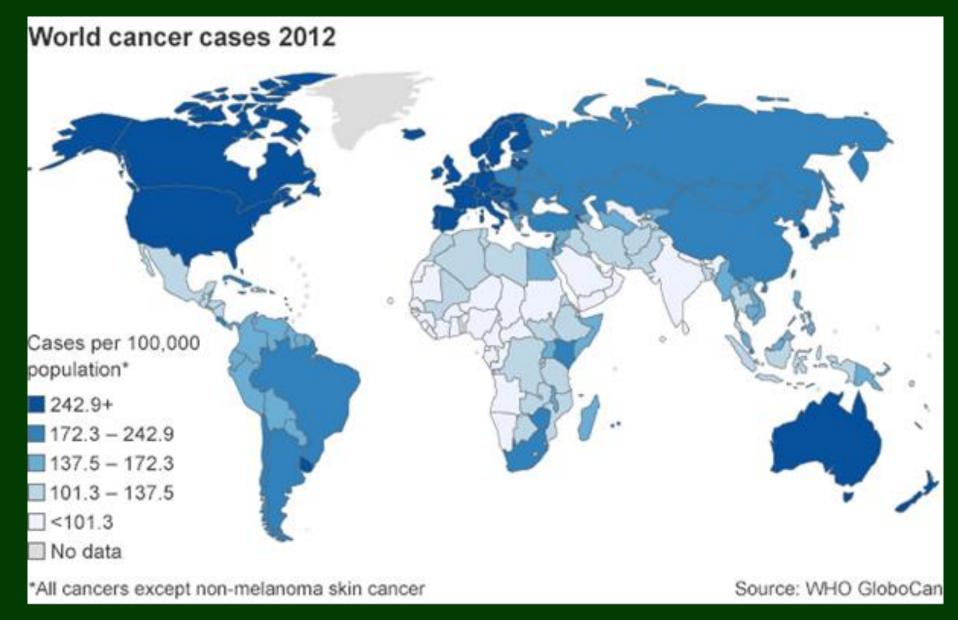
#### **Broadcast Tower**

Italy - Boscolo, P., et al., Int J Immunopathol Pharmacol, 2006. 19(4 Suppl): p. 43-8.

All above 15 studies found increased symptoms

#### EMR and Neurological Symptoms/ Cognitive Effects

- Headache, lethargy, dizziness, cognitive deficits, decreased concentration, dysasthesia and other neurological symptoms (Hocking B and Gobbo F. J Health Saf Environ 2011, 27(3): 185-195; Reeves G. "Review of Extensive workups of 34 USAF Patients Overexposed to RF." Aviat Aero Envt Med 2000; 71(3); 206–215) and Hocking B. 2001; 72(6); 590-1.)
- Memory loss, difficulty concentrating, irritability and depression in US embassy workers in Moscow exposed to RF-EMR (outside max. 5  $\mu$ W/cm2, inside <0.1  $\mu$ W/cm2) Lilienfeld AM et al., Foreign service health status study evaluation of health status of foreign service and other employees from selected eastern European posts. Final Report (Contract number 6025-619073) to the U.S. Department of State, July 31, 1978.
- Increased headaches/migraine associated with mobile phone use in 52,680
  Danish 7 year olds (Sudan M. et al., The Open Pediatric Medicine Journal, 2012, 6, 46-52).
- Neuro-behavioural effects associated with mobile/cordless phones in high school students in NZ (Redmayne M et al., Environmental Health 2013, 12:5).
- Mobile phone use associated with faster but less accurate responses to cognitive tasks in 13 year old Australian students (Abramson MJ et al., Bioelectromagnetics. 2009 Dec;30(8):678-86)
- Mobile phone use affects cognitive functions of adolescents, young adults and older adults (Leung S et al., Clin Neurophysiol. 2011 Nov;122(11):2203-16; Thomas S et al., Occup Environ Med. 2010 Dec;67(12):861-6;

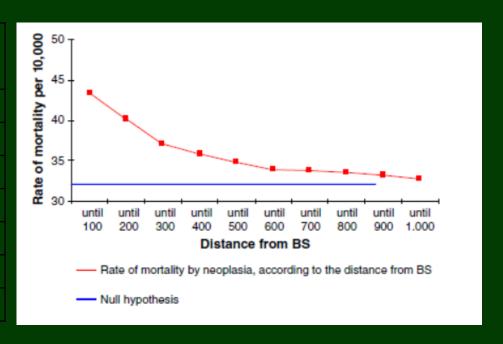


**World Cancer Report** by the World Health Organization (WHO)'s International Agency for Research on Cancer (IARC) . March i2014.

(http://www.iarc.fr/en/publications/books/wcr/wcr-order.php).

#### Cancer Deaths Near Mobile Base Stations

| Distance from MBS | Number of<br>Cancer deaths |
|-------------------|----------------------------|
| 0-100 m           | 3569                       |
| 100-200 m         | 1408                       |
| 200-300 m         | 973                        |
| 300-400 m         | 482                        |
| 400 -500 m        | 292                        |
| Total 0 - 500 m   | 6724                       |
| Beyond 1000 m     | 147                        |



## Cancer deaths within 500m from MBS: 6724/7191 = 93.5% Can't prove causality but needs to be considered with other evidence

(Dode et al., Mortality by neoplasia and cellular telephone base stations in the Belo Horizonte municipality, Minas Gerais state, Brazil. Science of The Total Environment 2011;409:3649–65)

### Cancer Clusters Near Radio/TV/Mobile Transmitters

**Australia** – increased childhood leukaemia incidence and mortality near radio/TV transmitters in N. Syd (Hocking B et al., Med J Aust. 1996; 165(11-12):601-5)

**UK** – increased caner near radio/TV towers(Dolk at el., Am J Epidemiol, 1997a; 145 (1):1-9, and 1997b;145(1):10-17), increased cancer incidence near MBS (Stewart A et al., Perspect Pub Health. 2012;132(6):299-304).

**Vatican city** — increased leukaemia (Micholozzi P. et al., Regional Health Authority, Ronie, Italy. Epidemiology, July 1998, Vol 9, Number 4, Supplement 354P)

**USA** - increased childhood cancer near radio/TV tower (CCSFDPH, 1988: Report on Cancer Incidence in Fan Francisco. Department of Public Health, San Francisco, CA) and increased childhood leukaemia in Hawaii (Maskarinec, G., and Cooper, J. 1993; Am. J. Epidemiology: 138:666)

**Sweden** – correlation between melanoma and FM radio transmitters (Hallberg O and Johansson O. Arch Environ Health, 2002;57(1):32-40).

**Germany** — increased cancer within 400 m of MBS (Eger et al., Umwelt Medizin Gesellschaft 2004;17(4) 1-7)

Israel – increased cancer (Wolf & Wolf, 2004 Int J Cancer Prevention 1(2):2-19)

Korea — increased cancer in women near a radio tower (Ha M et al., Arch Environ Health, 2003; 58(12) 756-62) and increased childhood leukaemia (Ha M et al., Am J Epidemiol. 2007;166(3):270-9)

**Brazil** — Increased cancer mortality near MBS (Dode et al., Science of The Total Environment 2011;409:3649–65

#### RF-EMR and Cancer – animal studies

 US govt study found non-thermal exposure for 2 years to 2.45 GHz (WiFi and radar frequency) <u>caused 4 times more cancers</u> in exposed rats.

Affected immune, hormonal, metabolic functions Chou C.K et al., Bioelectromagnetics, 1992. **13**(6): p. 469-96).

- Australian study found more than doubling of cancer in irradiated transgenic mice. Repacholi Repacholi M.H. et al., Radiat. Res\_1997 May;147(5):631-40
- German studies found low RF-EMR levels (typical exposures) could promote cancer Lerchl A et al., Tumor promotion by exposure to radiofrequency electromagnetic fields below exposure limits for humans, Biochem Biophys Res Comm (2015), doi: 10.1016/j.bbrc.2015.02.151; Tillmann T et al., Int. J. Radiat. Biol. 2010;86(7):529-41
- US National Toxicology Program preliminary data release 2016
   Significant increase in cancer risk in irradiated rats

#### RF-EMR is Associated with Cancer – Human Evidence

## Use of a mobile phone >10 years increases brain cancer risk > 100%

- Interphone (13 countries): 5,117 cases
- Hardell study (Swedish): 3, 439 cases
- CERENAT study (French): 447 cases

Cardis E. et al., Int J Epidemiol 2010;39:675–694; Occup Environ Med. 2011 Sep;68(9):631-40; INTERPHONE Study Group. Cancer Epidemiol. 2011 Oct;35(5):453-64

Hardell et al., Int J Oncol. 2008;32(5):1097-103; Int J Oncol. 2009;35(1):5-17; Int J Oncol. 2011;38(5):1465-74; Int J Epidemiol. 2011;40(4):1126-8 Pathophysiol. 2013;20(2):85-110; Carlberg M, Hardell L. Oncol Rep. 2015;33(6):3093-8; Hardell L & Carlberg M. Pathophysiol. 2015;22(1):1-13.

Coureau G et al. Mobile phone use and brain tumours in the CERENAT case-control study. Occup Environ Med. 2014 Jul;71(7):514-22

#### **RF-EMR Can Damage DNA**

**Published Review - 2009** 

49 studies - genotoxic effects (DNA damage)

43 studies - no genotoxic effects (no DNA damage)

Ruediger, HW, "Genotoxic effects of radiofrequency electromagnetic fields" Pathophysiology, 2009;16 (2–3): 67–69

2006 to October 2014

84 studies – genotoxic effects

41 studies - no genotoxic effects

Prof. Henry Lai (Washington University)

Over 100 peer-reviewed studies showing DNA damage

2016 – data released by US National Toxicology Program confirms DNA damage

#### RF- EMR Can Damage the Male Reproductive System

Review of **10 studies** (semen from **1492 men**) showed damage to sperm Adams JA et al., Effect of mobile telephones on sperm quality: A systematic review and meta-analysis. Environ Int. 2014;70:106-12

**4 hour** exposure to WiFi-enabled laptop damaged sperm Avendano C et al., Use of laptop computers connected to internet through Wi-Fi decreases human sperm motility and increases sperm DNA fragmentation. Fertil Steril; 2012;97(1):39-45

Study of **2028 college students** (2013-15) found sperm damage associated with mobile phone use. Zhang G. et al., Effects of cell phone use on semen parameters: Results from the MARHCS cohort study in Chongqing, China. Environ Int. 2016; 91:116–121

Review of 27 studies investigating the effects of RF-EMR on the male reproductive system – 21 reported negative consequences Houston BJ et al, Reproduction. 2016 Dec;152(6):R263-R276. Epub 2016 Sep 6

- Low Fertility
- Increased risk of genetic defects in future generations
- Erectile dysfunction (impotence)
- Increased risk of testicular and prostrate cancer



#### Evidence of RF-EMR Non-thermal Bioeffects – Key Scientific Reports

#### Commissioned by Governments:

- Status of Research on Biological Effects and Safety of Electromagnetic Radiation Telecommunication Frequencies. Division of Biophysics CSIRO, 1994 (Australia).
- The Stewart Commission Report, 2000 (UK).
- Bibliography of Reported Biological Phenomena ('Effects') and Clinical Manifestations Attributed to Microwave and Radio-frequency Radiation, Naval Medical Research Institute, 1971 (USA).
- Biological Effects of Electromagnetic Radiation (Radiowaves and Microwaves)- Eurasian Communist Countries. Army Medical Intelligence and Information Agency - Office of the Surgeon General, 1976 (USA).
- Radiofrequency Microwave Radiation Biological Effects and Safety Standards: A Review. Air Force Materiel Command, New York, 1994 (USA).

#### Commissioned by Telecommunications Industry:

- ECOLOG Institute Report for T-Mobil, DeTeMobil Deutsche Telekom MobilNet GmbH. 2000 (Germany)
- International Patent Application (#WO 2004/075598 A1) by Swisscom 2003 (Switzerland).

#### <u>Prepared by Independent Scientists:</u>

Bio-Initiative Report 2012 (an international panel of experts). www.bioinitiative.org

#### The WHO's International Agency for Research on Cancer:

• IARC Monograpahs. Non-ionizing Radiation, Part 2: Radiofrequency Electromagnetic Fields. Volume 102. 2013 (Lyon, France)

#### Electro-hypersensitivity is Similar to Acute Radiation Syndrome

- Symptoms of ARS may include nausea, vomiting, headache, and diarrhea.
  - These symptoms start within minutes to days after the exposure, can last for minutes up to several days, and may come and go.
- After the initial symptoms, a person usually looks and feels healthy for a period of time, after which he or she will become sick again with <u>variable symptoms and severity</u> that vary depending on the radiation dose that he or she received.
  - These symptoms include loss of appetite, fatigue, fever, nausea, vomiting, diarrhea, and possibly even seizures and coma.
  - This seriously ill stage may last from a few hours up to several months.
- People who receive a high radiation dose also can have **skin damage**. This damage can start to show within a few hours after exposure or it may be delayed for several days. It can **include swelling, itching, and redness of the skin (like a bad sunburn**) or may be more severe and include blisters or ulcers.
  - The skin may heal for a short time, followed by the return of swelling, itching, and redness days or weeks later.
  - Complete healing of the skin may take from several weeks up to a few years.
  - The time for skin to heal depends on the radiation dose the person's skin received.
  - People who receive a high radiation dose to all or part of the body also may experience temporary hair loss. It may take several weeks for the hair to grow back.

US Centers for Disease Control and Prevention http://emergency.cdc.gov/radiation/ars.asp