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Smart Meter Case Series

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Founded in 1965 as a non-profit medical association, the American Academy of Environmental Medicine (AAEM) is an international organization of physician and scientists interested in the complex relationship between the environment and health.

AAEM physicians and physicians world-wide are treating patients who report adverse, debilitating health effects following the installation of smart meters, which emit electromagnetic frequencies (EMF) and radiofrequencies (RF).

The peer reviewed, scientific literature demonstrates the correlation between EMF/RF exposure and neurological, cardiac, and pulmonary disease as well as reproductive disorders, immune dysfunction, cancer and other health conditions. The evidence is irrefutable. Despite this research, claims have been made that studies correlating smart meter emissions with adverse health effects do not exist.

The AAEM has received a case series submitted by Dr. Federica Lamech, MBBS, *Self-Reporting of Symptom Development from Exposure to Wireless Smart Meters' Radiofrequency Fields in Victoria*. AAEM supports this research. It is a well documented 92 case series that is scientifically valid. It clearly demonstrates adverse health effects in the human population from smart meter emissions.

The symptoms reported in this case series closely correlate not only with the clinical findings of environmental physicians, but also with the scientific literature. Many of the symptoms reported including fatigue, headaches, heart palpitations, dizziness and other symptoms have been shown to be triggered by electromagnetic field exposure under double blind, placebo controlled conditions. Symptoms in this case series also correlate with the Austrian Medical Association's Guidelines for the Diagnosis and Treatment of EMF Related Health Problems.

It is critically important to note that the data in this case series indicates that the "vast majority of cases" were not electromagnetically hypersensitive until *after* installation of smart meters. Dr. Lamech concludes that smart meters "may have unique characteristics that lower people's threshold for symptom development".

This research is the first of its kind, clearly demonstrating the correlation between smart meters and adverse health effects.

Based on the findings of this case series, AAEM calls for:

- Further research regarding smart meter health effects
- Accommodation for health considerations regarding smart meters.
- Avoidance of smart meter EMF/RF emissions based on health considerations, including the option to maintain analog meters.
- A moratorium on smart meters and implementation of safer technology
- Physicians and health care providers to consider the role of EMF and RF in the disease process, diagnosis and treatment of patients.

Passed by the Board of Directors of the American Academy of Environmental Medicine October 23, 2013

Please note: Smart Meter case series research to be released upon publication

Smart Meters; Assessment of Radiofrequency Microwave Radiation Emissions
from Smart Meters; Sage Associates, Environmental Consultants; 2011



Assessment of Radiofrequency Microwave Radiation Emissions from Smart Meters

Sage Associates
Santa Barbara, CA
USA

January 1, 2011

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SUMMARY OF FINDINGS

This Report has been prepared to document radiofrequency radiation (RF) levels associated with wireless smart meters in various scenarios depicting common ways in which they are installed and operated.

The Report includes computer modeling of the range of possible smart meter RF levels that are occurring in the typical installation and operation of a single smart meter, and also multiple meters in California. It includes analysis of both two-antenna smart meters (the typical installation) and of three-antenna meters (the collector meters that relay RF signals from another 500 to 5000 homes in the area).

RF levels from the various scenarios depicting normal installation and operation, and possible FCC violations have been determined based on both time-averaged and peak power limits (Tables 1 - 14).

Potential violations of current FCC public safety standards for smart meters and/or collector meters in the manner installed and operated in California are

predicted in this Report, based on computer modeling (Tables 10 – 17).

Tables 1 – 17 show power density data and possible conditions of violation of the FCC public safety limits, and Tables 18 – 33 show comparisons to health studies reporting adverse health impacts.

FCC compliance violations are likely to occur under normal conditions of installation and operation of smart meters and collector meters in California. Violations of FCC safety limits for uncontrolled public access are identified at distances within 6” of the meter. Exposure to the face is possible at this distance, in violation of the time-weighted average safety limits (Tables 10-11). FCC violations are predicted to occur at 60% reflection (OET Equation 10 and 100% reflection (OET Equation 6) factors*, both used in FCC OET 65 formulas for such calculations for time-weighted average limits. Peak power limits are not violated at the 6” distance (looking at the meter) but can be at 3” from the meter, if it is touched.

This report has also assessed the potential for FCC violations based on two examples of RF exposures in a typical residence. RF levels have been calculated at distances of 11” (to represent a nursery or bedroom with a crib or bed against a wall opposite one or more meters); and at 28” (to represent a kitchen work space with one or more meters installed on the kitchen wall).

FCC compliance violations are identified at 11” in a nursery or bedroom setting using Equation 10* of the FCC OET 65 regulations (Tables 12-13). These violations are predicted to occur where there are multiple smart meters, or one collector meter, or one collector meter mounted together with

several smart meters.

FCC compliance violations are not predicted at 28" in the kitchen work space for 60% or for 100% reflection calculations. Violations of FCC public safety limits are predicted for higher reflection factors of 1000% and 2000%, which are not a part of FCC OET 65 formulas, but are included here to allow for situations where site-specific conditions (highly reflective environments, for example, galley-type kitchens with many highly reflective stainless steel or other metallic surfaces) may be warranted.*

*FCC OET 65 Equation 10 assumes 60% reflection and Equation 6 assumes 100% reflection. RF levels are also calculated in this report to account for some situations where interior environments have highly reflective surfaces as might be found in a small kitchen with stainless steel or other metal counters, appliances and furnishings. This report includes the FCC's reflection factors of 60% and 100%, and also reflection factors of 1000% and 2000% that are more in line with those reported in Hondou, 2001; Hondou, 2006 and Vermeeren et al, 2010. The use of a 1000% reflection factor is still conservative in comparison to Hondou, 2006. A 1000% reflection factor is 12% (or 121 times as high) a factor for power density compared to Hondou et al, 2006 prediction of 1000 times higher power densities due to reflection. A 2000% reflection factor is only 22% (or 441 times) that of Hondou's finding that power density can be as high as 2000 times higher.

In addition to exceeding FCC public safety limits under some conditions of installation and operation, smart meters can produce excessively elevated RF exposures, depending on where they are installed. With respect to absolute RF exposure levels predicted for occupied space within dwellings, or outside areas like patios, gardens and walk-ways, RF levels are predicted to be substantially elevated within a few feet to within a few tens of feet from the meter(s).

For example, one smart meter at 11" from occupied space produces somewhere between 1.4 and 140 microwatts per centimeter squared (uW/cm²) depending on the duty cycle modeled (Table 12). Since FCC

OET 65 specifies that continuous exposure be assumed where the public cannot be excluded (such as is applicable to one's home), this calculation produces an RF level of 140 uW/cm² at 11" using the FCC's lowest reflection factor of 60%. Using the FCC's reflection factor of 100%, the figures rise to 2.2 uW/cm² – 218 uW/cm², where the continuous exposure calculation is 218 uW/cm² (Table 12). These are very significantly elevated RF exposures in comparison to typical individual exposures in daily life. Multiple smart meters in the nursery/bedroom example at 11" are predicted to generate RF levels from about 5 to 481 uW/cm² at the lowest (60%) reflection factor; and 7.5 to 751 uW/cm² using the FCC's 100% reflection factor (Table 13). Such levels are far above typical public exposures.

RF levels at 28" in the kitchen work space are also predicted to be significantly elevated with one or more smart meters (or a collector meter alone or in combination with multiple smart meters). At 28" distance, RF levels are predicted in the kitchen example to be as high as 21 uW/cm² from a single meter and as high as 54.5 uW/cm² with multiple smart meters using the lower of the FCC's reflection factor of 60% (Table 14). Using the FCC's higher reflection factor of 100%, the RF levels are predicted to be as high as 33.8 uW/cm² for a single meter and as high as 85.8 uW/cm² for multiple smart meters (Table 14). For a single collector meter, the range is 60.9 to 95.2 uW/cm² (at 60% and 100% reflection factors, respectively) (from Table 15).

Table 16 illustrates predicted violations of peak power limit (4000 uW/cm²) at 3" from the surface of a meter. FCC violations of peak power limit are predicted to occur for a single collector meter at both 60% and 100%

reflection factors. This situation might occur if someone touches a smart meter or stands directly in front.

Consumers may also have already increased their exposures to radiofrequency radiation in the home through the voluntary use of wireless devices (cell and cordless phones), PDAs like BlackBerry and iPhones, wireless routers for wireless internet access, wireless home security systems, wireless baby surveillance (baby monitors), and other emerging wireless applications.

Neither the FCC, the CPUC, the utility nor the consumer know what portion of the allowable public safety limit is already being used up or pre-empted by RF from other sources already present in the particular location a smart meter may be installed and operated.

Consumers, for whatever personal reason, choice or necessity who have already eliminated all possible wireless exposures from their property and lives, may now face excessively high RF exposures in their homes from smart meters on a 24-hour basis. This may force limitations on use of their otherwise occupied space, depending on how the meter is located, building materials in the structure, and how it is furnished.

People who are afforded special protection under the federal Americans with Disabilities Act are not sufficiently acknowledged nor protected. People who have medical and/or metal implants or other conditions rendering them vulnerable to health risks at lower levels than FCC RF limits may be particularly at risk (Tables 30-31). This is also likely to hold true for other

subgroups, like children and people who are ill or taking medications, or are elderly, for they have different reactions to pulsed RF. Childrens' tissues absorb RF differently and can absorb more RF than adults (Christ et al, 2010; Wiart et al, 2008). The elderly and those on some medications respond more acutely to some RF exposures.

Safety standards for peak exposure limits to radiofrequency have not been developed to take into account the particular sensitivity of the eyes, testes and other ball shaped organs. There are no peak power limits defined for the eyes and testes, and it is not unreasonable to imagine situations where either of these organs comes into close contact with smart meters and/or collector meters, particularly where they are installed in multiples (on walls of multi-family dwellings that are accessible as common areas).

In summary, no positive assertion of safety can be made by the FCC, nor relied upon by the CPUC, with respect to pulsed RF when exposures are chronic and occur in the general population. Indiscriminate exposure to environmentally ubiquitous pulsed RF from the rollout of millions of new RF sources (smart meters) will mean far greater general population exposures, and potential health consequences. Uncertainties about the existing RF environment (how much RF exposure already exists), what kind of interior reflective environments exist (reflection factor), how interior space is utilized near walls), and other characteristics of residents (age, medical condition, medical implants, relative health, reliance on critical care equipment that may be subject to electronic interference, etc) and unrestrained access to areas of property where meter is located all argue for caution.

INTRODUCTION

How Smart Meters Work

This report is limited to a very simple overview of how smart meters work, and the other parts of the communication system that are required for them to transmit information on energy usage within a home or other building. The reader can find more detailed information on smart meter and smart grid technology from numerous sources available on the Internet.

Often called ‘advanced metering infrastructure or AMI’, smart meters are a part of an overall system that includes a) a mesh network or series of wireless antennas at the neighborhood level to collect and transmit wireless information from all the smart meters in that area back to a utility.

The mesh network (sometimes called a distributed antenna system) requires wireless antennas to be located throughout neighborhoods in close proximity to where smart meters will be placed. Often, a municipality will receive a hundred or more individual applications for new cellular antenna service, which is specifically to serve smart meter technology needs. The communication network needed to serve smart meters is typically separate from existing cellular and data transmission antennas (cell tower antennas). The mesh network (or DAS) antennas are often utility-pole mounted. This part of the system can spread hundreds of new wireless antennas throughout neighborhoods.

Smart meters are a new type electrical meter that will measure your energy usage, like the old ones do now. But, it will send the information back to the utility by wireless signal (radiofrequency/microwave radiation signal) instead of having a utility meter reader come to the property and manually do the monthly electric service reading. So, smart meters are replacements for the older ‘spinning dial’ or analog electric meters. Smart meters are not optional, and utilities are installing them even where occupants do not want them.

In order for smart meters to monitor and control energy usage via this wireless communication system, the consumer must be willing to install power transmitters inside the home. This is the third part of the system and involves placing power transmitters (radiofrequency/microwave radiation emitting devices) within the home on each appliance. A power transmitter is required to measure the energy use of individual appliances (e.g., washing machines, clothes dryers, dishwashers, etc) and it will send information via wireless radiofrequency signal back to the smart meter. Each power transmitter handles a separate appliance. A typical kitchen and laundry may have a dozen power transmitters in total. If power transmitters are not installed by the homeowner, or otherwise mandated on consumers via federal legislation requiring all new appliances to have power transmitters built into them, then there may be little or no energy reporting nor energy savings.

Smart meters could also be installed that would operate by wired, rather than wireless means. Shielded cable, such as is available for cable modem (wired internet connection) could connect smart meters to utilities. However, it is

not easy to see the solution to transmit signals from power transmitters (energy use for each appliance) back to the utility.

Collector meters are a special type of smart meter that can serve to collect the radiofrequency/microwave radiation signals from many surrounding buildings and send them back to the utility. Collector meters are intended to collect and re-transmit radiofrequency information for somewhere between 500-5000 homes or buildings. They have three operating antennas compared to two antennas in regular smart meters. Their radiofrequency microwave emissions are higher and they send wireless signal much more frequently. Collector meters can be place on a home or other building like smart meters, and there is presently no way to know which a homeowner or property owner might receive.

Mandate

The California Public Utilities Commission has authorized California's investor-owned utilities (including Pacific Gas & Electric, Southern California Edison Company and San Diego Gas & Electric) to install more than 10 million new wireless* smart meters in California, replacing existing electric meters as part of the federal SmartGrid program.

The goal is to provide a new residential energy management tool. It is intended to reduce energy consumption by providing computerized information to customers about what their energy usage is and how they might reduce it by running appliances during 'off-time' or 'lower load'

conditions. Presumably this will save utilities from having to build new facilities for peak load demand. Utilities will install a new smart meter on every building to which electrical service is provided now. In Southern California, that is about 5 million smart meters in three years for a cost of around \$1.6 billion dollars. In northern California, Pacific Gas & Electric is slated to install millions of meters at a cost of more than \$2.2 billion dollars. If consumers decide to join the program (so that appliances can report energy usage to the utility), they can be informed about using energy during off-use or low-use periods, but only if consumers also agree to install additional wireless power transmitters on appliances inside the home. Each power transmitter is an additional source of pulsed RF that produces high exposures at close range in occupied space within the home.

“Proponents of smart meters say that when these meters are teamed up with an in-home display that shows current energy usage, as well as a communicating thermostat and software that harvest and analyze that information, consumers can see how much consumption drives cost -- and will consume less as a result. Utilities are spending billions of dollars outfitting homes and businesses with the devices, which wirelessly send information about electricity use to utility billing departments and could help consumers control energy use.”

Wall Street Journal, April 29, 2009.

The smart meter program is also a tool for load-shedding during heavy electrical use periods by turning utility meters off remotely, and for reducing the need for utility employees to read meter data in the field.

Purpose of this Report

This Report has been prepared to document radiofrequency radiation (RF) levels associated with wireless smart meters in various scenarios depicting common ways in which they are installed and operated.

The Report includes computer modeling of the range of possible smart meter RF levels that are occurring in the typical installation and operation of a single smart meter, and also multiple meters in California. It includes analysis of both two-antenna smart meters (the typical installation) and of three-antenna meters (the collector meters that relay RF signals from another 500 to 5000 homes in the area).

RF levels from the various scenarios depicting normal installation and operation, and possible FCC violations have been determined based on both time-averaged and peak power limits (Tables 1 - 14).

Potential violations of current FCC public safety standards for smart meters and/or collector meters in the manner installed and operated in California are illustrated in this Report, based on computer modeling (Tables 10 – 17).

Tables which present data, possible conditions of violation of the FCC public safety limits, and comparisons to health studies reporting adverse health impacts are summarized (Tables 18 – 33).

The next section describes methodology in detail, but generally this Report provides computer modeling results for RF power density levels for these scenarios, analysis of whether and under what conditions FCC public safety

limit violations may occur, and comparison of RF levels produced under these scenarios to studies reporting adverse health impacts with chronic exposure to low-intensity radiofrequency radiation at or below levels produced by smart meters and collector meters in the manner installed and operated in California.

- 1) Single 'typical' meter - tables showing RF power density at increasing distances in 0.25' (3") intervals outward for single meter (two-antenna meter). Effects of variable duty cycles (from 1% to 90%) and various reflection factors (60%, 100%, 1000% and 2000%) have been calculated.
- 2) Multiple 'typical' meters - tables showing RF power density at increasing distances as above.
- 3) Collector meter - tables showing RF power density related to a specialized collector meter which has three internal antennas (one for every 500 or 5000 homes) as above.
- 4) Collector meter - a single collector meter installed with multiple 'typical' two-antenna meters as above.
- 5) Tables are given to illustrate the distance to possible FCC violations for time-weighted average and peak power limits (in inches).
- 6) Tables are given to document RF power density levels at various key distances (11" to a crib in a bedroom; 28" to a kitchen work area; and 6" for a person attempting to read the digital readout of a smart meter, or inadvertently working around a meter).
- 7) Tables are given to compare RF power density levels with studies reporting adverse health symptoms and effects (and those levels of RF associated with such health effects).
- 8) Tables are given to compare smart meter and collector meter RF to BioInitiative Report recommended limit (in feet).

Framing Questions

In view of the rapid deployment of smart meters around the country, and the relative lack of public information on their radiofrequency (RF) emission

profiles and public exposures, there is a crucial need to provide independent technical information.

There is very little solid information on which decision-makers and the public can make informed decisions about whether they are an acceptable new RF exposure, in combination with pre-existing RF exposures.

On-going Assessment of Radiofrequency Radiation Health Risks

The US NIEHS National Toxicology Program nominated radiofrequency radiation for study as a carcinogen in 1999. Existing safety limits for pulsed RF were termed “not protective of public health” by the Radiofrequency Interagency Working Group (a federal interagency working group including the FDA, FCC, OSHA, the EPA and others). Recently, the NTP issued a statement indicating it will complete its review by 2014 (National Toxicology Program, 2009). The NTP radiofrequency radiation study results have been delayed for more than a decade since 1999 and very little laboratory or epidemiological work has been completed. Thus, the explosion of wireless technologies is producing radiofrequency radiation exposures over massive populations before questions are answered by federal studies about the carcinogenicity or toxicity of low-intensity RF such as are produced by smart meters and other SmartGrid applications of wireless. The World Health Organization and the International Agency for Research on Cancer have not completed their studies of RF (the IARC WHO RF Health Monograph is not expected until at least 2011). In the United States, the National Toxicology Program listed RF as a potential carcinogen for study, and has not released any study results or findings a decade later.

There are no current, relevant public safety standards for pulsed RF involving chronic exposure of the public, nor of sensitive populations, nor of people with metal and medical implants that can be affected both by localized heating and by electromagnetic interference (EMI) for medical wireless implanted devices.

Considering that millions of smart meters are slated to be installed on virtually every electrified building in America, the scope of the question is large and highly personal. Every family home in the country, and every school classroom – every building with an electric meter – is to have a new wireless meter – and thus subject to unpredictable levels of RF every day.

- 1) Have smart meters been tested and shown to comply with FCC public safety limits (limits for uncontrolled public access)?
- 2) Are these FCC public safety limits sufficiently protective of public health and safety? This question is posed in light of the last thirty years of international scientific investigation and public health assessments documenting the existence of bioeffects and adverse health effects at RF levels far below current FCC standards. The FCC's standards have not been updated since 1992, and did not anticipate nor protect against chronic exposures (as opposed to acute exposures) from low-intensity or non-thermal RF exposures, particularly pulsed RF exposures.
- 3) What demonstration is there that wireless smart meters will comply with existing FCC limits, as opposed to under strictly controlled

conditions within government testing laboratories?

4) Has the FCC been able to certify that compliance is achievable under real-life use conditions including, but not limited to:

- In the case where there are both gas and electric meters on the home located closely together.
- In the case where there is a "bank" of electric and gas meters, on a multi-family residential building such as on a condominium or apartment building wall. There are instances of up to 20 or more meters located in close proximity to occupied living space in the home, in the classroom or other occupied public space.
- In the case where there is a collector meter on a home that serves the home plus another 500 to 5000 other residential units in the area, vastly increasing the frequency of RF bursts.
- In the case where there is one smart meter on the home but it acts as a relay for other local neighborhood meters. What about 'piggybacking' of other neighbors' meters through yours? How can piggybacking be reasonably estimated and added onto the above estimates?
- What about the RF emissions from the power transmitters? Power transmitters installed on appliances (perhaps 10-15 of

them per home) and each one is a radiofrequency radiation transmitter.

- How can the FCC certify a system that has an unknown number of such transmitters per home, with no information on where they are placed?
 - Where people with medical/metal implants are present?
(Americans with Disabilities Act protects rights)
- 5) What assessment has been done to determine what pre-existing conditions of RF exposure are already present. On what basis can compliance for the family inside the residence be assured, when there is no verification of what other RF sources exist on private property? How is the problem of cumulative RF exposure properly assessed (wireless routers, wireless laptops, cell phones, PDAs, DECT or other active-base cordless phone systems, home security systems, baby monitors, contribution of AM, FM, television, nearby cell towers, etc).
- 6) What is the cumulative RF emissions worst-case profile? Is this estimate in compliance?
- 7) What study has been done for people with metal implants* who require protection under Americans with Disabilities Act? What is known about how metal implants can intensify RF, heat tissue and result in adverse effects below RF levels allowed for the general public. What is known about electromagnetic interference (EMI) from spurious RF sources in the environment (RFID scanners, cell

towers, security gates, wireless security systems, wireless communication devices and routers, wireless smart meters, etc)

*Note: There are more than 20 million people in the US who need special protection against such exposures that may endanger them. High peak power bursts of RF may disable electronics in some critical care and medical implants. We already have reports of wireless devices disabling deep brain stimulators in Parkinson's patients and there is published literature on malfunctions with critical care equipment.

PUBLIC SAFETY LIMITS FOR RADIOFREQUENCY RADIATION

The FCC adopted limits for Maximum Permissible Exposure (MPE) are generally based on recommended exposure guidelines published by the National Council on Radiation Protection and Measurements (NCRP) in "Biological Effects and Exposure Criteria for Radiofrequency Electromagnetic Fields," (NCRP, 1986).

In the United States, the Federal Communications Commission (FCC) enforces limits for both occupational exposures (in the workplace) and for public exposures. The allowable limits are variable, according to the frequency transmitted. Only public safety limits for uncontrolled public access are assessed in this report.

Maximum permissible exposures (MPE) to radiofrequency electromagnetic fields are usually expressed in terms of the plane wave equivalent power density expressed in units of milliwatts per square centimeter (mW/cm²) or alternatively, absorption of RF energy is a function of frequency (as well as

body size and other factors). The limits vary with frequency. Standards are more restrictive for frequencies at and below 300 MHz. Higher intensity RF exposures are allowed for frequencies between 300 MHz and 6000 MHz than for those below 300 MHz.

In the frequency range from 100 MHz to 1500 MHz, exposure limits for field strength and power density are also generally based on the MPE limits found in Section 4.1 of "*IEEE Standard for Safety Levels with Respect to Human Exposure to Radio Frequency Electromagnetic Fields, 3 kHz to 300 GHz*," ANSI/IEEE C95.1-1992 (IEEE, 1992, and approved for use as an American National Standard by the American National Standards Institute (ANSI).

US Federal Communications Commission (FCC) Exposure Standards

Table 1, Appendix A FCC LIMITS FOR MAXIMUM PERMISSIBLE EXPOSURE (MPE)

(A) Limits for Occupational/Controlled Exposure

Frequency Range (MHz)	Electric Field Strength (E) (V/m)	Magnetic Field Strength (H) (A/m)	Power Density (S) (mW/cm ²)	Averaging Time [E] ² [H] ² or S (minutes)
0.3-3.0	614	1.63	(100)*	6
3.0-30	1842/f	4.89/f	(900/f ₂)*	6
30-300	61.4	0.163	1.0	6
300-1500			f/300	6
1500-100,000			5	6

B) FCC Limits for General Population/Uncontrolled Exposure

Frequency Range (MHz)	Electric Field Strength (E) (V/m)	Magnetic Field Strength (H) (A/m)	Power Density (S) (mW/cm ²)	Averaging Time [E] ² [H] ² or S (minutes)
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0.3-3.0	614	1.63	(100)*	30
3.0-30	824/f	2.19/f	(180/f ₂)*	30
30-300	27.5	0.073	0.2	30
300-1500	--	--	f/1500	30
1500-100,000	--	--	1.0	30

f = frequency in MHz

*Plane-wave equivalent power density

NOTE 1: ***Occupational/controlled*** limits apply in situations in which persons are exposed as a consequence of their employment provided those persons are fully aware of the potential for exposure and can exercise control over their exposure. Limits for occupational/controlled exposure also apply in situations when an individual is transient through a location where occupational/controlled limits apply provided he or she is made aware of the potential for exposure.

NOTE 2: ***General population/uncontrolled*** exposures apply in situations in which the general public may be exposed, or in which persons that are exposed as a consequence of their employment may not be fully aware of the potential for exposure or can not exercise control over their exposure. Source: FCC Bulletin OET 65 Guidelines, page 67 OET, 1997.

In this report, the public safety limit for a smart meter is a combination of the individual antenna frequency limits and how much power output they create. A smart meter contains two antennas. One transmits at 915 MHz and the other at 2405 MHz. They can transmit at the same time, and so their effective radiated power is summed in the calculations of RF power density. Their combined limit is 655 $\mu\text{W}/\text{cm}^2$. This limit is calculated by formulas from Table 1, Part B and is proportionate to the power output and specific safety limit (in MHz) of each antenna.

For the collector meter, with its three internal antennas, the combined public safety limit for time-averaged exposure is 571 MHz (a more restrictive level since it includes an additional 824 MHz antenna that has a lower limit than either the 915 MHz or the 2405 MHz antennas). In a collector meter, only two of the three antennas can transmit simultaneously (the 915 MHz LAN and the GSM 850 MHz (from the FCC Certification Exhibit titled RF Exposure Report for FCC ID: SK9AMI-2A)). The proportionate power output of each antenna plus the safety limit for each antenna frequency combines to give a safety limit for the collector meter of 571 $\mu\text{W}/\text{cm}^2$. Where one collector meter is combined with multiple smart meters, the combined limit is weighted upward by the additional smart meters' contribution, and is 624 $\mu\text{W}/\text{cm}^2$.

Continuous Exposure

FCC Bulletin OET 65 guidelines require the assumption of continuous

exposure in calculations. Duty cycles offered by the utilities are a fraction of continuous use, and significantly diminish predictions of RF exposure.

At present, there is no evidence to prove that smart meters are functionally unable to operate at higher duty cycles that some utilities have estimated (estimates vary from 1% to 12.5% duty cycle, and as high as 30%).

Confirming this is the Electric Power Research Institute (EPRI) in its “Perspective on Radio-Frequency Exposure Associated with Residential Automatic Meter Reading Technology (EPRI, 2010) According to EPRI:

"The technology not only provides a highly efficient method for obtaining usage data from customers, but it also can provide up-to-the-minute information on consumption patterns since the meter reading devices can be programmed to provide data as often as needed." Emphasis added

The FCC Bulletin OET 65 guidelines specify that continuous exposure (defined by the FCC OET 65 as 100% duty cycle) is required in calculations where it is not possible to control exposures to the general public.

"It is important to note that for general population/uncontrolled exposures it is often not possible to control exposures to the extent that averaging times can be applied. In those situations, it is often necessary to assume continuous exposure." (emphasis added)
FCC Bulletin OET 65, p, 10

“Duty factor. *The ratio of pulse duration to the pulse period of a periodic pulse train. Also, may be a measure of the temporal transmission characteristic of an intermittently transmitting RF source such as a paging antenna by dividing average transmission duration by the average period for transmissions. A duty factor of 1.0*

corresponds to continuous operation.
(emphasis added)

FCC Bulletin OET 65, p. 2

This provision then specifies duty cycles to be increased to 100%.

The FCC Guidelines (OET 65) further address cautions that should be observed for uncontrolled public access to areas that may cause exposure to high levels of RF.

Re-radiation

The foregoing also applies to high RF levels created in whole or in part by re-radiation. A convenient rule to apply to all situations involving RF radiation is the following:

- (1) Do not create high RF levels where people are or could reasonably be expected to be present, and (2) [p]revent people from entering areas in which high RF levels are necessarily present.*
- (2) Fencing and warning signs may be sufficient in many cases to protect the general public. Unusual circumstances, the presence of multiple sources of radiation, and operational needs will require more elaborate measures.*
- (3) Intermittent reductions in power, increased antenna heights, modified antenna radiation patterns, site changes, or some combination of these may be necessary, depending on the particular situation.*

FCC OET 65, Appendix B, p. 79

Fencing, distancing, protective RF shielded clothing and signage warning occupants not to use portions of their homes or properties are not feasible nor desirable in public places the general public will spend time (schools, libraries, cafes, medical offices and clinics, etc) These mitigation strategies may be workable for RF workers, but are unsuited and intolerable for the public.

Reflections

A major, uncontrolled variable in predicting RF exposures is the degree to which a particular location (kitchen, bedroom, etc) will reflect RF energy created by installation of one or more smart meters, or a collector meter and multiple smart meters. The reflectivity of a surface is a measure of the amount of reflected radiation. It can be defined as the ratio of the intensities of the reflected and incident radiation. The reflectivity depends on the angle of incidence, the polarization of the radiation, and the electromagnetic properties of the materials forming the boundary surface. These properties usually change with the wavelength of the radiation. The reflectivity of polished metal surfaces is usually quite high (such as stainless steel and polished metal surfaces typical in kitchens, for example).

Reflections can significantly increase localized RF levels. High uncertainty exists about how extensive a problem this may create in routine installations of smart meters, where the utility and installers have no idea what kind of reflectivity is present within the interior of buildings.

Reflections in Equation 6 and 10 of the FCC OET Bulletin 65 include rather

minimal reflection factors of 100% and 60%, respectively. This report includes higher reflection factors in line with published studies by Hondou et al, 2006, Hondou, 2002 and Vermeeren et al, 2010. Reflection factors are modeled at 1000% and 2000% as well as at 60% and 100%, based on published scientific evidence for highly reflective environments. Hondou (2002) establishes that power density can be higher than conventional formulas predict using standard 60% and 100% reflection factors.

"We show that this level can reach the reference level (ICNIRP Guideline) in daily life. This is caused by the fundamental properties of electromagnetic field, namely, reflection and additivity. The level of exposure is found to be much higher than estimated by conventional framework of analysis that assumes that the level rapidly decreases with the inverse square distance between the source and the affected person."

"Since the increase of electromagnetic field by reflective boundaries and the additivity of sources has not been recognized yet, further detailed studies on various situations and the development of appropriate regulations are required."

Hondou et al (2006) establishes that power densities 1000 times to 2000 times higher than the power density predictions from computer modeling (that does not account properly for reflections) can be found in daily living situations. Power density may not fall off with distance as predicted by formulas using limited reflection factors. The RF hot spots created by reflection can significantly increase RF exposures to the public, even above current public safety limits.

"We confirm the significance of microwave reflection reported in our previous Letter by experimental and numerical studies. Furthermore, we show that 'hot spots' often emerge in reflective areas, where the local exposure level is much higher than average."

"Our results indicate the risk of 'passive exposure' to microwaves."

"The experimental values of intensity are consistently higher than predicted values. Intensity does not even decrease with distance from the source."

*"We further confirm the existence of microwave 'hotspots', in which the microwaves are 'localized'. The intensity measured at one hot spot 4.6 m from the transmitter is the same as that at 0.1 m from the transmitter in the case with out reflection (free boundary condition). Namely, the intensity at the hot spot is increased by **approximately 2000 times** by reflection."*

Emphasis added

"To confirm our experimental findings of the greater-than-predicted intensity due to reflection, as well as the hot spots, we performed two numerical simulations...". " intensity does not monotonically decrease from the transmitter, which is in clear contrast to the case without reflection."

*"The intensity at the hot spot $(X, Y, Z) = 1.46, -0.78, 105$) around 1.8 m from the transmitter in the reflective boundary condition is **approximately 1000 times higher** than that at the same position in the free boundary condition. The result of the simulation is thus consistent with our experiments, although the values differ owing to the different conditions imposed by computational limits."*

Emphasis added

"(t)he result of the experiment is also reproduced: a greater than predicted intensity due to reflection, as well as the existence of hot spots."

*"In comparison with the control simulation using the free boundary condition, we find that the power density at the hot spot is increased by **approximately a thousand times** by reflection."*

Emphasis added

Further, the author comments that:

"we may be passively exposed beyond the levels reported for electro-

medical interference and health risks."

"Because the peak exposure level is crucial in considering electro-medical interference, interference (in) airplanes, and biological effects on human beings, we also need to consider the possible peak exposure level, or 'hot spots', for the worst-case estimation."

Reflections and re-radiation from common building material (tile, concrete, stainless steel, glass, ceramics) and highly reflective appliances and furnishings are common in kitchens, for example. Using only low reflectivity FCC equations 6 and 10 may not be informative. Published studies underscore how use of even the highest reflection coefficient in FCC OET Bulletin 65 Equations 6 and 10 likely underestimate the potential for reflection and hot spots in some situations in real-life situations.

This report includes the FCC's reflection factors of 60% and 100%, and also reflection factors of 1000% and 2000% that are more in line with those reported in Hondou, 2001; Hondou, 2006 and Vermeeren et al, 2010. The use of a 1000% reflection factor in this report is still conservative in comparison to Hondou, 2006. A 1000% reflection factor is 12% of Hondou's larger power density prediction (or 121 times, rather than 1000 times)/ The 2000% reflection factor is 22% of Hondou's figure (or 441 times in comparison to 2000 times higher power density in Hondou, 2006).

Peak Power Limits

In addition to time-averaged public safety limits that require RF exposures to

be time-averaged over a 30 minute time period, the FCC also addresses peak power exposures. The FCC refers back to the ANSI/IEEE C95.1-1992 standard to define what peak power limits are.

The ANSI/IEEE C95.1-1999 standard defines peak power density as “*the maximum instantaneous power density occurring when power is transmitted.*” (p. 4) Thus, there is a second method to test FCC compliance that is not being assessed in any FCC Grants of Authorization.

“Note that although the FCC did not explicitly adopt limits for peak power density, guidance on these types of exposures can be found in Section 4.4 of the ANSI/IEEE C95.1-1992 standard.”

Page 10, OET 65

The ANSI/IEEE limit for peak power to which the FCC refers is:

“For exposures in uncontrolled environments, the peak value of the mean squared field strengths should not exceed 20 times the square of the allowed spatially averaged values (Table 2) at frequencies below 300 MHz, or the equivalent power density of 4 mW/cm² for f between 300 MHz and 6 GHz”.

The peak power exposure limit is 4000 uW/cm² for all smart meter frequencies (all transmitting antennas) for any instantaneous RF exposure of 4 milliwatts/cm² (4 mW/cm²) or higher which equals 4000 microwatts/cm² (uW/cm²).

This peak power limit applies to all smart meter frequencies for both the smart meter (two-antenna configuration) and the collector meter (three-antenna configuration). All these antennas are within the 300 MHz to 6 GHz frequency range where the 4000 uW/cm² peak power limit applies

(Table 3, ANSI/IEEE C95.1-1999, page 15).

Smart meters emit frequencies within the 800 MHz to 2400 MHz range.

Exclusions

This peak power limit applies to all parts of the body with the important exception of the eyes and testes.

The ANSI/IEEE C95.1-1999 standard specifically excludes exposure of the eyes and testes from the peak power limit of 4000 uW/cm²*. However, nowhere in the ANSI/IEEE nor the FCC OET 65 documents is there a lower, more protective peak power limit given for the eyes and testes (see also Appendix C).

“The following relaxation of power density limits is allowed for exposure of all parts of the body except the eyes and testes.” (p.15)

“Since most exposures are not to uniform fields, a method has been derived, based on the demonstrated peak to whole-body averaged SAR ratio of 20, for equating nonuniform field exposure and partial body exposure to an equivalent uniform field exposure. This is used in this standard to allow relaxation of power density limits for partial body exposure, except in the case of the eyes and the testes.” (p.20)

“In the case of the eyes and testes, direct relaxation of power density limits is not permitted.”(p. 30)

*Note: This leaves unanswered what instantaneous peak power is permissible from smart meters. The level must be below 4000 uW/cm². This report shows clearly that smart meters can create instantaneous peak power exposures where the face (eyes) and body (testes) are going to be in

close proximity to smart meter RF pulses. RF levels at and above 4000 uW/cm² are likely to occur if a person puts their face close to the smart meter to read data in real time. The digital readout of the smart meter requires close inspection, particularly where there is glare or bright sunlight, or low lighting conditions. Further, some smart meters are installed inside buildings within inches of occupied space, virtually guaranteeing exposures that may violate peak power limits. Violations of peak power limits are likely in these circumstances where there is proximity within about 6" and highly reflective surfaces or metallic objects. The eyes and testes are not adequately protected by the 4000 uW/cm² peak power limit, and in the cases described above, may be more vulnerable to damage (Appendix C for further discussion).

METHODOLOGY

Radiofrequency fields associated with SMART Meters were calculated following the methodology described here. Prediction methods specified in Federal Communications Commission, Office of Engineering and Technology Bulletin 65 Edition 97-01, August 1997 were used in the calculations.¹

Section 2 of FCC OET 65 provides methods to determine whether a given facility would be in compliance with guidelines for human exposure to RF radiation. We used equation (3)

$$S = \frac{P \times G \times \partial}{4 \times \pi \times R^2} = \frac{EIRP \times \partial}{4 \times \pi \times R^2} = \frac{1.64 \times ERP \times \partial}{4 \times \pi \times R^2}$$

where:

S = power density (in μW/cm²)

P = power input to the antenna (in W)

G = power gain of the antenna in the direction of interest relative to an isotropic radiator

∂ = duty cycle of the transmitter (percentage of time that the transmitter actually transmits over time)

R = distance to the center of radiation of the antenna

$$\text{EIRP} = \text{PG}$$

$$\text{ERP} = 1.64 \text{ EIRP}$$

where:

EIRP = is equivalent (or effective) isotropically radiated power
referenced to an isotropic radiator

ERP = is equivalent (or effective) radiated power referenced to a
half-wave dipole radiator

Analysis input assumptions

1. SMART Meters [SK9AMI-4] have two RF transmitters (antennas) and are the type of smart meters typically installed on most buildings. They contain two antennas that transmit RF signals (916 MHz LAN and 2405 MHz Zigbee). The antennas CAN transmit simultaneously, and thus the maximum RF exposure is determined by the summation of power densities (from the FCC Certification Exhibit titled RF Exposure Report for FCC ID: SK9AMI-4).

Model SK9AMI-4 transmits on 915 MHz is designated as LAN
Antenna Gain for each model.

- a. Transmitter Power Output (TPO) used is as shown on the grant issued by the Telecommunications Certification Body (TCB).
 - b. Antenna gain in dBi (decibels compared to an isotropic radiator) used comes from the ACS Certification Exhibit.
2. Collector Meters [SK9AMI-2A] have three RF transmitters (antennas)

and are installed where the utility needs them to relay RF signals from surrounding smart meters in a neighborhood. Collector meters contain a third antenna (GSM 850 MHz, 915 MHz LAN and 2405 MHz Zigbee). Collector meters can be placed on any building where a collector meter is needed to relay signals from the surrounding area. Estimates of the number of collector meters varies between one per 500 to one per 5000 smart meters. Collector meters will thus ‘piggyback’ the RF signals of hundreds or thousands of smart meters through the one collector meter. In a collector meter, only two of the three antennas can transmit simultaneously (the 915 MHz LAN and the GSM 850 MHz (from the FCC Certification Exhibit titled RF Exposure Report for FCC ID: SK9AMI-2A)).

3. The Cell Relay transmitting at 2480 MHz is not on most meters and not considered in this analysis.
 - a. Transmitter Power Output (TPO) used is as shown on the grant issued by the Telecommunications Certification Body (TCB).
 - b. Antenna gain in dBi (decibels compared to an isotropic radiator) used comes from the ACS Certification Exhibit.

ERP (Effective Radiated Power) used in the computer modeling here is calculated using the TPO and antenna gain established for each model

Reflection Factor

This equation is modified with the inclusion of a ground reflection factor as recommended by the FCC. The ground reflection factor accounts for possible ground reflections that could enhance the resultant power density.

A 60% (0.6) enhancement would result in a 1.6 (1 + 0.6) increase of the field

Radio Frequency		ACS and TCB Certification data sheet							
		SK9AMI-2A				SK9AMI-4			
		ACS		TCB		ACS		TCB	
Radio	Frequency	dBm	Watts	dBi	Watts	dBm	Watts	dBi	Watts
GSM	850	21.9	1.5136	-1.0					
LAN	915	21.92	0.1556	3.0		24.27	0.2673	2.2	0.267
LAN	916								0.257
GSM	1900	28.7	0.7413	1.0					
Register	2405	18.71	0.0743	1.0	0.074	19.17	0.0826	4.4	
Cell Relay	2406	-14.00	0.00004	-4.00					
Assumptions: TPO per TCB, Antenna Gain per ACS Certification									
ERP Calculation: Bold figures are used for single tier ERP in modeling									
Type	TPO	dBi	dB	Gain	ERP	Freq	Model		
1900 GSM	0.741	1.0	-1.15	0.77	0.5689	1900			
850 GSM	1.514	-1.0	-3.15	0.48	0.7328	850			
RFLAN	0.267	2.2	0.05	1.01	0.2704	915			
ZIGBEE	0.074	1.0	-1.15	0.77	0.0570	2405			
							SK9AMI-4		
							SK9AMI-2A		

strength or a $2.56 = (1.6)^2$ increase in the power density. Similar increases for larger enhancements of the field strength are calculated by the square of the original field plus the enhancement percentage. ^{2.3.4}

Reflection Factors:

$$\begin{aligned}
 60\% &= (1 + 0.6)^2 = 2.56 \text{ times} \\
 100\% &= (1 + 1)^2 = 4 \text{ times} \\
 1000\% &= (1 + 10)^2 = 121 \text{ times} \\
 2000\% &= (1 + 20)^2 = 441 \text{ times}
 \end{aligned}$$

Duty Cycle

How frequently SMART Meters can and will emit RF signals from each of the antennas within the meters is uncertain, and subject to wide variations in estimation. For this reason, and because FCC OET 65 mandates a 100% duty cycle (continuous exposure where the public cannot be excluded) the report gives RF predictions for all cases from 1% to 100% duty cycle at 10%

intervals. The reader can see the variation in RF emissions predicted at various distances from the meter (or bank of meters) using this report at all duty cycles. Thus, for purposes of this report, duty cycles have been estimated from infrequent to continuous. Duty cycles for SMART Meters were calculated at:

Duty cycle ∂ :

1%	50%
5%	60%
10%	70%
20%	80%
30%	90%
40%	100%

Continuous Exposure

FCC Bulletin OET 65 and the ANSI/IEEE C95.1-1992, 1999 requires that continuous exposure be calculated for situations where there is uncontrolled public access. Continuous exposure in this case means reading the tables at 100% duty cycle.

“Another feature of the exposure guidelines is that exposures, in terms of power density, E2 or H2, may be averaged over certain periods of time with the average not to exceed the limit for continuous exposure.”¹¹

“As shown in Table 1 of Appendix A, the averaging time for occupational/controlled exposures is 6 minutes, while the averaging time for general population/uncontrolled exposures is 30 minutes. It is important to note that for general population/uncontrolled exposures it is often not possible to control exposures to the extent that averaging times can be applied. In those situations, it is often necessary to assume continuous exposure.” (FCC OET 65, Page 15)

Calculation Distances in Tables (3-inch increments)

Calculations were performed in 3-inch (.25 foot) increments from the antenna center of radiation. Calculations have been taken out to a distance of 96 feet from the antenna center for radiation for each of the conditions above. The antenna used for the various links in a SMART Meter is assumed to be at the center of the SMART Meter from front to back – approximately 3 inches from the outer surface of the meter.

Calculations have also been made for a typical nursery and kitchen. In the nursery it has been assumed that the baby in his or her crib that is located next to the wall where the electric SMART Meters are mounted. The closest part of the baby's body can be as close as 11 inches* from the meter antenna. In the kitchen it has been assumed that a person is standing at the counter along the wall where the electric SMART Meters are mounted. In that case the closest part of the adult's body can be located as close to the meter antenna as 28 inches.

The exposure limits are variable according to the frequency (in megahertz). Table 1, Appendix A show exposure limits for occupational (Part A) and uncontrolled public (Part B) access to radiofrequency radiation such as is emitted from AM, FM, television and wireless sources.

* Flush-mounted main electric panels that house smart meters are commonly installed; placing smart meters 5" 6" closer to occupied space than box-mounted main electric panels that sit outward on exterior building walls. Assumptions on spacing are made for flush-mounted panels.

Conditions Influencing Radiofrequency Radiation Level Safety

The location of the meter in relation to occupied space, or outside areas of private property such as driveways, walk-ways, gardens, patios, outdoor play areas for children, pet shelters and runs, and many typical configurations can place people in very close proximity to smart meter wireless emissions. In many instances, smart meters may be within inches or a few feet of occupied space or space that is used by occupants for daily activities.

Factors that influence how high RF exposures may be include, but are not limited to where the meter is installed in relation to occupied space, how often the meters are emitting RF pulses (duty cycle), and what reflective surfaces may be present that can greatly intensify RF levels or create 'RF hot spots' within rooms, and so on. In addition, there may be multiple wireless meters installed on some multi-family residential buildings, so that a single unit could have 20 or more electric meters in close proximity to each other, and to occupants inside that unit. Finally, some meters will have higher RF emissions, because – as collector units – their purpose is to collect and resend the RF signals from many other meters to the utility. A collector meter is estimated to be required for every 500 to 5000 buildings. Each collector meter contains three, rather than two transmitting antennas. This means higher RF levels will occur on and inside buildings with a collector meter, and significantly more frequent RF transmissions can be expected. At present, there is no way to predict whose property will be used for

installation of collector meters.

People who are visually reading the wireless meters 'by sight' or are visually inspecting and/or reading the digital information on the faceplate may have their eyes and faces only inches from the antennas.

Current standards for peak power limit do not have limits to protect the eyes and testes from instantaneous peak power from smart meter exposures, yet relevant documents identify how much more vulnerable these organs are, and the need for such safety limits to protect the eyes and testes.

No Baseline RF Assessment

Smart meter and collector meter installation are taking place in an information vacuum. FCC compliance testing takes place in an environment free of other sources of RF, quite unlike typical urban and some rural environments. There is no assessment of baseline RF conditions already present (from AM, FM, television and wireless communication facilities (cell towers), emergency and dispatch wireless, ham radio and other involuntary RF sources. Countless properties already have elevated RF exposures from sources outside their own control.

Consumers may also have already increased their exposures to radiofrequency radiation in the home through the voluntary use of wireless devices (cell and cordless phones), PDAs like BlackBerry and iPhones, wireless routers for wireless internet access, wireless home security systems, wireless baby surveillance (baby monitors), and other emerging wireless applications.

Neither the FCC, the CPUC, the utility nor the consumer know what portion of the allowable public safety limit is already being used up or pre-empted by RF from other sources already present in the particular location a smart meter may be installed and operated.

Consumers, for whatever personal reason, choice or necessity who have already eliminated all possible wireless exposures from their property and lives, may now face excessively high RF exposures in their homes from smart meters. This may force limitations on use of their otherwise occupied space, depending on how the meter is located, building materials in the structure, and how it is furnished.

RESULTS, FINDINGS AND CONCLUSIONS

The installation of wireless ‘smart meters’ in California can produce significantly high levels of radiofrequency radiation (RF) depending on many factors (location of meter(s) in relation to occupied or usable space, duty cycle or frequency of RF transmissions, reflection and re-radiation of RF, multiple meters at one location, collector meters, etc).

Power transmitters that will relay information from appliances inside buildings with wireless smart meters produce high, localized RF pulses. Any appliance that contains a power transmitter (for example, dishwashers, washers, dryers, ranges and ovens, convection ovens, microwave ovens, flash water heaters, refrigerators, etc) will create another ‘layer of RF signals’ that may cumulatively increase RF exposures from the smart

meter(s).

It should be emphasized that no single assertion of compliance can adequately cover the vast number of site-specific conditions in which smart meters are installed. These site-specific conditions determine public exposures and thus whether they meet FCC compliance criteria.

Tables in this report show either distance to an FCC safety limit (in inches) or they show the predicted (calculated) RF level at various distances in microwatts per centimeter squared ($\mu\text{W}/\text{cm}^2$).

Both depictions are useful to document and understand RF levels produced by smart meters (or multiple smart meters) and by collector meters (or collections of one collector and multiple smart meters).

Large differences in the results of computer modeling occur in this report by bracketing the uncertainties (running a sufficient number of computer scenarios) to account for variability introduced by possible duty cycles and possible reflection factors.

FCC equations from FCC OET 65 provide for calculations that incorporate 60% or 100% reflection factors. Studies cited in this report document higher possible reflections (in highly reflective environments) and support the inclusion of higher reflection factors of 1000% and 2000% based on Vermeeren et al, 2010, Hondou et al, 2006 and Hondou, 2002. Tables in the report provide the range of results predicted by computer modeling for duty cycles from 1% to 100%, and reflection factors of 60%, 100%, 1000%, and

2000% for comparison purposes. FCC violations of time-weighted average calculations and peak power limit calculations come directly from FCC OET 65 and from ANSI/IEEE c95.1-1992, 1999. Duty cycle (or how frequently the meters will produce RF transmissions leading to elevated RF exposures) is uncertain, so the full range of possible duty cycles are included, based on best available information at this date.

- Tables 1-2 show radiofrequency radiation (RF) levels at 6” (to represent a possible face exposure). These are data tables.
- Tables 3-4 show RF levels at 11” (to represent a possible nursery/bedroom exposure). These are data tables.
- Tables 5-6 show RF levels at 28” to represent a possible kitchen work space exposure. These are data tables.
- Tables 7-9 show the distance to the FCC violation level for time-weighted average limits and for peak power limits (in inches). These are data tables.
- Tables 10-15 show where FCC violations may occur at the face, in the nursery or in the kitchen scenarios. These are colored tables highlighting where FCC violations may occur under all scenarios.
- Tables 16-29 show comparisons of smart meter RF levels with studies that report adverse health impacts from low-intensity, chronic exposure to similar RF exposures. These are colored tables highlighting where smart meter RF levels exceed levels associated with adverse health impacts in published scientific studies.
- Tables 30-31 show RF levels in comparison to Medtronic advisory limit for MRI exposures to radiofrequency radiation at 0.1 W/Kg or about 250 uW/cm². These are colored tables highlighting where smart

meter RF levels may exceed those recommended for RF exposure.

- Tables 32-33 show RF levels from smart meters in comparison to the BioInitiative Report recommendation of 0.1 uW/cm² for chronic exposure to pulsed radiofrequency radiation.

Findings

RF levels from the various scenarios depicting normal installation and operation, and possible FCC violations have been determined based on both time-averaged and peak power limits (Tables 1 - 14).

Potential violations of current FCC public safety standards for smart meters and/or collector meters in the manner installed and operated in California are illustrated in this Report, based on computer modeling (Tables 10 – 17).

Tables that present data, possible conditions of violation of the FCC public safety limits, and comparisons to health studies reporting adverse health impacts are summarized (Tables 18 – 33).

Where do predicted FCC violations occur for the 655 uW/cm² time-averaged public safety limit at the face at 6" distance from the meter?

Table 10 shows that for one smart meter, no violations are predicted to occur at 60% or 100% reflection factor at any duty cycle, but violations are predicted to occur with nearly all scenarios using either 1000% or 2000% reflection factors.

Table 10 also shows that for multiple smart meters, FCC violations are predicted to occur at 60% reflection factor @ 50% to 100% duty cycles; and also at 100% reflection factor @ 30% to 100% duty cycle. All scenarios using either 1000% or 2000% reflection factors indicate FCC violations can occur (or conservatively at 12% to 22% of those in Hondou et al, 2006).

Table 11 shows that for one collector meter, one violation occurs at 60% @ 100% duty cycle; and at 100% reflection factor for duty cycles between 60% and 100%. Violations are predicted to occur at all scenarios using either 1000% or 2000% reflection factors.

Table 11 also shows that for one collector meter plus multiple smart meters, FCC violations can occur at 60% reflection factor @ 40% to 100% duty cycles; and also at 100% reflection factor @ 30% to 100% duty cycle. All scenarios using either 1000% or 2000% reflection factors indicate FCC violations can occur.

Where do predicted FCC violations occur for the 655 uW/cm² time-averaged public safety limit in the nursery crib at 11" distance?

Table 12 shows that for one smart meter, no violations are predicted to occur at 60% or 100% reflection factor at any duty cycle, but violations would be predicted with nearly all scenarios using either 1000% or 2000% reflection factors.

Table 12 also shows that for multiple smart meters, no FCC violations are predicted to occur at 60% reflection factor at any duty cycle; and also at 100% reflection factor @ 90% and 100% duty cycle. All scenarios using either 1000% or 2000% reflection factors indicate FCC violations can occur.

Table 13 shows that for one collector meter, one violation occurs at 100% reflection @ 100% duty cycle. No violations at 60% reflection are predicted. Violations are predicted to occur at all scenarios using 1000% reflection except @ 1% duty cycle. All 2000% reflection scenarios indicate FCC violations can occur.

Table 13 shows that for one collector meter plus multiple smart meters, FCC violations are not predicted to occur at 60% reflection factor. At 100% reflection factor, violations are predicted at 60% to 100% duty cycles. FCC violations are predicted for all 1000% and 2000% reflection factors with the exception of 1000% reflection at 1% duty cycle.

Where do predicted FCC violations occur for the 655 uW/cm² time-averaged public safety limit in the kitchen work space at 28" distance?

Table 14 shows that for one smart meter, no violations are predicted to occur at 60% or 100% reflection factor at any duty cycle. Violations would be predicted with scenarios of 1000% reflection @ 70% to 100% duty cycles and at 2000% reflection factor @ 20% to 100% duty cycles.

Table 14 also shows that for multiple smart meters, no FCC violations are predicted to occur at 60% or at the 100% reflection factors at any duty cycle. Violations are predicted at 1000% reflection factor @ 70% to 100% duty cycles and at 2000% reflection factor @ 20% to 100% duty cycles.

Table 15 shows that for one collector meter, one violation occurs at 100% reflection @ 100% duty cycle. No violations at 60% reflection are predicted. Violations are predicted to occur at all scenarios using 1000% reflection except @ 1% duty cycle. All 2000% reflection scenarios indicate FCC violations can occur.

Table 15 shows that for one collector meter plus multiple smart meters, FCC violations are not predicted to occur at 60% or at 100% reflection factors at any duty cycle. At 1000% reflection factor, violations are predicted at 30% to 100% duty cycles. FCC violations are also predicted at 2000% reflection factor @ 10 to 100% duty cycles.

Where can peak power limits be violated? The peak power limit of 4000 uW/cm2 instantaneous public safety limit at 3" distance? This limit may be exceeded wherever smart meters and collector meters (face plate or any portion within 3" of the internal antennas can be accessed directly by the public.

Table 16 shows that for one smart meter, no violations are predicted to occur at 60% or 100% reflection factor at any duty cycle. Peak power limit violations would be predicted with scenarios of 1000% reflection @ 10% to 100% duty cycles and at 2000% reflection factor @ 10% to 100% duty cycles.

Table 16 also shows that for multiple smart meters, peak power limit violations are predicted to occur at 60% reflection @ 60% to 100% duty cycle and for 100% reflection @ 40% to 100% duty cycles. Violations are predicted at 1000% reflection factor @ 10% to 100% duty cycles and at

2000% reflection factor @1% to 100% duty cycles.

Table 17 shows that for one collector meter, peak power limit violations are predicted to occur at 60% reflection @80% to 100% duty cycles and at 100% reflection @ 50% to 100% duty cycles. Violations of peak power limit are predicted to occur at all scenarios using 1000% reflection except @ 1%; and for 2000% reflection violations of peak power limit are predicted at all duty cycles.

Table 17 shows that for one collector meter plus multiple smart meters, peak power limit violations are predicted to occur at 60% @ 40% to 100% and 100% reflection @ 30% to 100% duty cycles. At 1000% and 2000% reflection factors, peak power limit violations are predicted at all duty cycles.

Where are RF levels associated with inhibition of DNA repair in human stem cells at 92.5 uW/cm2 exceeded the in the nursery crib at 11" distance?

Table 18 shows that for one smart meter, RF exposures associated with inhibition of DNA repair in human stem cells are predicted to occur at 60% reflection factor@ 70% to 100% duty cycles, and at 100% reflection factor @ 50% to 100% duty cycles. All scenarios using either 1000% or 2000% reflection factors exceed these RF exposures except 1000% at 1% duty cycle.

Table 18 also shows that for multiple smart meters, RF exposures associated with inhibition of DNA repair in human stem cells are predicted to occur at 60% reflection factor@ 20% to 100% duty cycles, and at 100% reflection factor @ 20% to 100% duty cycles. All scenarios using either 1000% or 2000% reflection factors exceed these RF exposure levels except 1000% at 1% duty cycle.

Table 19 shows that for one collector meter, RF exposures associated with inhibition of DNA repair in human stem cells are predicted to occur at 60% reflection factor@ 30% to 100% duty cycles, and at 100% reflection factor @ 20% to 100% duty cycles. All scenarios using either 1000% or 2000% reflection factors exceed these RF exposure levels.

Table 19 shows that for one collector meter plus multiple smart meters, RF exposures associated with inhibition of DNA repair in human stem cells are predicted to occur at 60% reflection factor @ 20% to 100% duty cycles, and at 100% reflection factor @ 10% to 100% duty cycles. All scenarios using either 1000% or 2000% reflection factors exceed these RF exposure levels.

Where are RF levels associated with pathological leakage of the blood-brain barrier at 0.4 – 8 uW/cm² exceeded the in the nursery crib at 11" distance?

Table 20 shows that for one smart meter, RF exposures associated with pathological leakage of the blood-brain barrier at 8 uW/cm² are predicted to occur at 60% reflection factor @ 10% to 100% duty cycles, and at 100% reflection factor @ 5% to 100% duty cycles. RF levels at 0.4 uW/cm² (the lower end of the range) are exceeded at all duty cycles and at all reflection factors in the nursery in the crib.

Table 20 also shows that for multiple smart meters, RF exposures associated with pathological leakage of the blood-brain barrier at 8 uW/cm² are predicted to occur at 60% reflection factor @ 5% to 100% duty cycles, and at 100% reflection factor @ 5% to 100% duty cycles. RF levels at 0.4 uW/cm² (the lower end of the range) are exceeded at all duty cycles and at all reflection factors in the nursery in the crib.

Table 21 shows that for one collector meter, RF exposures associated with pathological leakage of the blood-brain barrier at 8 uW/cm² are predicted to occur at 60% reflection factor @ 5% to 100% duty cycles, and at 100% reflection factor @ 5% to 100% duty cycles. RF levels at 0.4 uW/cm² (the lower end of the range) are exceeded at all duty cycles and at all reflection factors in the nursery in the crib.

Table 21 shows that for one collector meter plus multiple smart meters, RF exposures associated with pathological leakage of the blood-brain barrier at 8 uW/cm² are predicted to occur at 60% reflection factor @ 5% to 100% duty cycles, and at 100% reflection factor @ 1% to 100% duty cycles. RF levels at 0.4 uW/cm² (the lower end of the range) are exceeded at all duty cycles and at all reflection factors in the nursery in the crib.

Where are RF levels associated with adverse neurological symptoms, cardiac problems and increased cancer risk exceeded in the nursery crib at 11" distance?

Table 22 shows that for one smart meter, RF exposures associated with adverse neurological symptoms above 0.1 uW/cm² are exceeded at all duty cycles and at all reflection factors in the nursery in the crib.

Table 22 shows that for multiple smart meters, RF exposures associated with adverse neurological symptoms above 0.1 uW/cm² are exceeded at all duty cycles and at all reflection factors in the nursery in the crib.

Table 23 shows that for one collector meter, RF exposures associated with adverse neurological symptoms above 0.1 uW/cm² are exceeded at all duty cycles and at all reflection factors in the nursery in the crib.

Table 23 shows that for one collector meter plus multiple smart meters, RF exposures associated with adverse neurological symptoms above 0.1 uW/cm² are exceeded at all duty cycles and at all reflection factors in the nursery in the crib.

Where are RF levels associated with inhibition of DNA repair in human stem cells at 92.5 uW/cm² exceeded in the kitchen work space at 28" distance?

Table 24 shows that for one smart meter, RF levels do not exceed those associated with inhibition of DNA repair at 60% or 100% reflection factor at any duty cycle. RF levels are exceeded at 1000% @ 10% to 100% duty cycles; and at 2000% reflection factor @ 5% to 100% duty cycles.

Table 24 also shows that for multiple smart meters, RF levels do not exceed those associated with inhibition of DNA repair at 60% or 100% reflection factor at any duty cycle. RF levels are exceeded at 1000% @ 5% to 100% duty cycles; and at 2000% reflection factor @ 1% to 100% duty cycles.

Table 25 shows that for one collector meter, RF levels do not exceed those associated with inhibition of DNA repair at 60% at any duty cycle; at 100% reflection factor they are exceeded at 70% to 100% duty cycles.. RF levels

are exceeded at 1000% @ 5% to 100% duty cycles; and at 2000% reflection factor @ 1% to 100% duty cycles.

Table 25 shows that for one collector meter plus multiple smart meters, RF levels exceed those associated with inhibition of DNA repair at 60% reflection@100% duty cycle; at 100% reflection factor they are exceeded at 70% to 100% duty cycles.. RF levels are exceeded at 1000% @ 5% to 100% duty cycles; and at 2000% reflection factor @ 1% to 100% duty cycles.

Where are RF levels associated with pathological leakage of the blood-brain barrier and neuron death at 0.4 – 8 uW/cm2 risk in the kitchen work space at 28" distance?

Table 26 shows that for one smart meter, RF exposures associated with pathological leakage of the blood-brain barrier at 8 uW/cm2 are predicted to occur at 60% reflection factor@ 40% to 100% duty cycles, and at 100% reflection factor @ 30% to 100% duty cycles, and at all 1000% and 2000% reflections. RF levels at 0.4 uW/cm2 (the lower end of the range) are exceeded at all duty cycles and at all reflection factors in the kitchen work space except at 1% duty cycle for 60% and 100% reflections.

Table 26 also shows that for multiple smart meters, RF exposures associated with pathological leakage of the blood-brain barrier at 8 uW/cm2 are predicted to occur at 60% reflection factor@ 30% to 100% duty cycles, and at 100% reflection factor @ 20% to 100% duty cycles, and at all 1000% and 2000% reflections. RF levels at 0.4 uW/cm2 (the lower end of the range) are exceeded at all duty cycles and at all reflection factors in the kitchen.

Table 27 shows that for one collector meter, RF exposures associated with pathological leakage of the blood-brain barrier at 8 uW/cm2 are predicted to occur at 60% reflection factor@ 20% to 100% duty cycles, and at 100% reflection factor @ 10% to 100% duty cycles. RF levels at 0.4 uW/cm2 (the lower end of the range) are exceeded at all duty cycles and at all reflection factors in the kitchen work space.

Table 27 shows that for one collector meter plus multiple smart meters, RF exposures associated with pathological leakage of the blood-brain barrier at 8 uW/cm2 are predicted to occur at 60% reflection factor@ 20% to 100%

duty cycles, and at 100% reflection factor @ 20% to 100% duty cycles. RF levels at 0.4 uW/cm² (the lower end of the range) are exceeded at all duty cycles and at all reflection factors in the kitchen work space.

Where are RF levels associated with adverse neurological symptoms, cardiac problems and increased cancer risk in the kitchen work space at 28" distance?

Table 28 shows that for one smart meter, RF exposures associated with adverse neurological symptoms above 0.1 uW/cm² are exceeded at all duty cycles and at all reflection factors in the kitchen work space.

Table 28 shows that for multiple smart meters, RF exposures associated with adverse neurological symptoms above 0.1 uW/cm² are exceeded at all duty cycles and at all reflection factors in the kitchen work space.

Table 29 shows that for one collector meter, RF exposures associated with adverse neurological symptoms above 0.1 uW/cm² are exceeded at all duty cycles and at all reflection factors in the kitchen work space.

Table 29 shows that for one collector meter plus multiple smart meters, RF exposures associated with adverse neurological symptoms above 0.1 uW/cm² are exceeded at all duty cycles and at all reflection factors in the kitchen work space.

Where do RF levels exceed the Medtronics Safety Advisory?

Table 30: At no duty cycles for either 60% or 100% reflection factors; between 10% and 100% duty factors for 1000% and between 5% and 100% duty factors for 2000% reflection (for one smart meter).

Table 30: At 60% reflection @ 60% to 100% duty cycle; and at 100% reflection @ 40% to 100% duty cycle; at 1000% reflection @ 5% to 100% duty cycle and for all duty cycles at 2000% reflection (for multiple smart meters).

Table 31: At 60% reflection @ 70% to 100% duty cycle; at 100% reflection at 50% to 100% duty cycles; at 1000% reflection @ 5% to 100% and at all

duty cycles for 2000% reflection (for one collector meter).

Table 31: At 60% reflection @ 40% to 100% duty cycle; at 100% reflection at 30% to 100% duty cycles; and at all duty cycles for both 1000% reflection and for 2000% reflection (for one collector meter plus three smart meters).

Where are RF levels associated with smart meters in all their configurations (one meter, multiple smart meters, one collector meter, one collector plus multiple smart meters) above those recommended in the BioInitiative Report (2007)?

Tables 32 and 33 depict the distance from the center of radiation for the smart meter(s) and collector meter scenarios in feet. The distances (in feet) at which RF levels exceed the BioInitiative Report recommended limit of 0.1 uW/cm² is as small as 3.4' (one smart meter at 60% reflection and 1% duty cycle). At 60% reflection and 100% duty cycle, the distance to the BioInitiative recommended limit increases to 34 feet for one smart meter.

When multiples of smart meters are considered, the shortest distance to where the BioInitiative Report recommended limit is exceeded is 9.7 feet (for 60% reflection @ 1% duty cycle). It increases to 97' @100% duty cycle for multiple smart meters.

For a single collector meter, the shortest distance to a BioInitiative Report exceedence is 5.9 feet (60% reflection @ 1% duty cycle). At 60% reflection and 100% duty cycle, it increases to 59 feet.

For a collector and multiple smart meters, the shortest distance is 10.9 feet at 60% reflection @ 1% duty cycle, and increases to 108 feet at 100% duty cycle.

Conclusions

FCC compliance violations are likely to occur under widespread conditions of installation and operation of smart meters and collector meters in California. Violations of FCC safety limits for uncontrolled public access

are identified at distances within 6" of the meter. Exposure to the face is possible at this distance, in violation of the time-weighted average safety limits (Tables 10-11). FCC violations are predicted to occur at 60% reflection and 100% reflection factors*, both used in FCC OET 65 formulas for such calculations for time-weighted average limits. Peak power limits are not violated at the 6" distance (looking at the meter) but can be at 3" from the meter, if it is touched.

This report has also assessed the potential for FCC violations based on two examples of RF exposures in a typical residence. RF levels have been calculated at distances of 11" (to represent a nursery or bedroom with a crib or bed against a wall opposite one or more meters); and at 28" (to represent a kitchen work space with one or more meters installed on the kitchen wall).

FCC compliance violations are identified at 11" in a nursery or bedroom setting using Equation 10* of the FCC OET 65 regulations (Tables 12-13). These violations are predicted to occur where there are multiple smart meters, or one collector meter, or one collector meter mounted together with several smart meters.

FCC compliance violations are not predicted at 28" in the kitchen work space for 60% or for 100% reflection calculations. Violations of FCC public safety limits are predicted for higher reflection factors of 1000% and 2000%, which are not a part of FCC OET 65 formulas, but are included here to allow for situations where site-specific conditions (highly reflective environments, for example, galley-type kitchens with many highly reflective stainless steel or other metallic surfaces) may be warranted (see Methodology Section).

In addition to exceeding FCC public safety limits under some conditions of installation and operation, smart meters can produce excessively elevated RF exposures, depending on where they are installed. With respect to absolute RF exposure levels predicted for occupied space within dwellings, or outside areas like patios, gardens and walk-ways, RF levels are predicted to be substantially elevated within a few feet to within a few tens of feet from the meter(s).

For example, one smart meter at 11” from occupied space produces somewhere between 1.4 and 140 microwatts per centimeter squared ($\mu\text{W}/\text{cm}^2$) depending on the duty cycle modeled (Table 12). Since FCC OET 65 specifies that continuous exposure be assumed where the public cannot be excluded (such as is applicable to one’s home), this calculation produces an RF level of 140 $\mu\text{W}/\text{cm}^2$ at 11” using the FCCs lowest reflection factor of 60%. Using the FCC’s reflection factor of 100%, the figures rise to 2.2 $\mu\text{W}/\text{cm}^2$ – 218 $\mu\text{W}/\text{cm}^2$, where the continuous exposure calculation is 218 $\mu\text{W}/\text{cm}^2$ (Table 12). These are very significantly elevated RF exposures in comparison to typical individual exposures in daily life. Multiple smart meters in the nursery/bedroom example at 11” are predicted to generate RF levels from about 5 to 481 $\mu\text{W}/\text{cm}^2$ at the lowest (60%) reflection factor; and 7.5 to 751 $\mu\text{W}/\text{cm}^2$ using the FCCs 100% reflection factor (Table 13). Such levels are far above typical public exposures.

RF levels at 28” in the kitchen work space are also predicted to be significantly elevated with one or more smart meters (or a collector meter alone or in combination with multiple smart meters). At 28” distance, RF

levels are predicted in the kitchen example to be as high as 21 $\mu\text{W}/\text{cm}^2$ from a single meter and as high as 54.5 $\mu\text{W}/\text{cm}^2$ with multiple smart meters using the lower of the FCCs reflection factor of 60% (Table 14).

Using the FCCs higher reflection factor of 100%, the RF levels are predicted to be as high as 33.8 $\mu\text{W}/\text{cm}^2$ for a single meter and as high as 85.8 $\mu\text{W}/\text{cm}^2$ for multiple smart meters (Table 14). For a single collector meter, the range is 60.9 to 95.2 $\mu\text{W}/\text{cm}^2$ (at 60% and 100% reflection factors, respectively) (from Table 15).

Table 16 illustrates predicted violations of peak power limit (4000 $\mu\text{W}/\text{cm}^2$) at 3" from the surface of a meter. FCC violations of peak power limit are predicted to occur for a single collector meter at both 60% and 100% reflection factors. This situation might occur if someone touches a smart meter or stands directly in front.

Uncertainty About Actual RF Levels

Consumers may also have already increased their exposures to radiofrequency radiation in the home through the voluntary use of wireless devices (cell and cordless phones), PDAs like BlackBerry and iPhones, wireless routers for wireless internet access, wireless home security systems, wireless baby surveillance (baby monitors), and other emerging wireless applications.

Neither the FCC, the CPUC, the utility nor the consumer know what portion of the allowable public safety limit is already being used up or pre-empted

by RF from other sources already present in the particular location a smart meter may be installed and operated.

Consumers, for whatever personal reason, choice or necessity who have already eliminated all possible wireless exposures from their property and lives, may now face excessively high RF exposures in their homes from smart meters. This may force limitations on use of their otherwise occupied

space, depending on how the meter is located, building materials in the structure, and how it is furnished.

People who are afforded special protection under the federal Americans with Disabilities Act are not sufficiently acknowledged nor protected. People who have medical and/or metal implants or other conditions rendering them vulnerable to health risks at lower levels than FCC RF limits may be particularly at risk (Tables 30-31). This is also likely to hold true for other subgroups, like children and people who are ill or taking medications, or are elderly, for they have different reactions to pulsed RF. Childrens' tissues absorb RF differently and can absorb more RF than adults (Christ et al, 2010; Wiart et al, 2008). The elderly and those on some medications respond more acutely to some RF exposures.

Eyes and Testes - Safety standards for peak exposure limits to radiofrequency have not been developed to take into account the particular sensitivity of the eyes, testes and other ball shaped organs. There are no peak power limits defined for the eyes and testes, and it is not unreasonable to imagine situations where either of these organs comes into close contact

with smart meters and/or collector meters, particularly where they are installed in multiples (on walls of multi-family dwellings that are accessible as common areas).

What can be determined from the relevant standards (FCC and ANSI/IEEE and certain IEEE committee documents) is that the eye and testes are potentially much more vulnerable to damage, but that there is no scientific basis on which to develop a new, more protective safety limit. What is certain is that the peak power limit of 4000 $\mu\text{W}/\text{cm}^2$ exceeds what is safe (Appendix C).

In summary, no positive assertion of safety can be made by the FCC, nor relied upon by the CPUC, with respect to pulsed RF when exposures are chronic and occur in the general population. Indiscriminate exposure to environmentally ubiquitous pulsed RF from the rollout of millions of new RF sources (smart meters) will mean far greater general population exposures, and potential health consequences. Uncertainties about the existing RF environment (how much RF exposure already exists), what kind of interior reflective environments exist (reflection factor), how interior space is utilized near walls), and other characteristics of residents (age, medical condition, medical implants, relative health, reliance on critical care equipment that may be subject to electronic interference, etc) and unrestrained access to areas of property where meter is located all argue for caution.

Electronic Interference

Consumers may experience electronic interference (electromagnetic interference or EMI) from smart meter wireless signals. The FCC also is charged with investigating consumer complaints about electronic interference.

“The FCC requires that unlicensed low-power RF devices must not create interference and users of such equipment must resolve any interference problems or cease operation. According to the FCC (47CFR Part 15): “The operator of a radio frequency device shall be required to cease operating the device upon notification by a Commission representative that the device is causing harmful interference. Operation shall not resume until the condition causing the harmful interference has been corrected.”

(EPRI, 2010)

Medical and other critical care equipment in the home environment may not work, or work properly due to electronic interference from smart meters.

Security systems, surveillance monitors and wireless intercoms may be rendered inoperable or unreliable. Some cordless telephones do not work reliably, or have substantial interference from smart meter RF emissions.

Electronic equipment and electrical appliances may be damaged or have to be replaced with other, newer equipment in order not to be subject to electromagnetic interference from smart meter RF bursts.

Americans With Disabilities Act

People who have medical implants, particularly metal implants, may be

more sensitive to spurious RF exposures for two reasons. Electromagnetic interference (EMI) with critical care medical equipment and medical implants is a potentially serious threat. Patients with deep-brain stimulators (Parkinson's disease patients) have reported adverse health effects due to RF from various environmental sources like security gates and RFID scanners. Patients with deep brain stimulators have reported the devices to be reprogramming or electrodes shut-down as a result of encounters with wireless RFID scanners. One manufacturer, Medtronic, has issued a warning for DBS implant patients to limit RF exposure to less than 0.1 W/Kg SAR (or sixteen times lower than for the general public) for MRI exposures.

The IEEE SC4 committee (2001) considered changes to existing ANSI/IEEE standards adopted in 1992 (C95.1-1992). They discussed vulnerable organs (eyes, testes) and metallic implants that can intensify localized RF exposures within the body and its tissues.

“Question 20: Are there specific tissues or points within the body that have particularly high susceptibilities to local heating due to thermal properties in the immediate vicinity of the tissue?”

Committee minutes include the following discussion on metallic implants.

“Metallic implants are an interesting example of this question. There can be very localized high field concentrations around the tips of long metal structures, in the gaps of wire loops. Of course, these metal devices don't create energy, but can only redistribute it, so the effect is limited to some extent. Also the high thermal conductivity and specific heat capacity make them good thermal sinks for any localized heat sources generated around them.”

Since deep brain stimulators in Parkinson's patients involve metal implants that are essentially long metal structures with tips that interface with brain tissue and nerves within the brain and body, exposing such patients with implants to high levels of pulsed RF that can produce localized, high RF within the body is certainly inadvisable. It is clear the IEEE SC4 committee recognized the potential risk by to calling such implanted metallic devices good 'thermal sinks' for localized heating dissipation.

The FCC's Grants of Authorization and other certification procedures do not ensure adequate safety to safeguard people under Department of Justice protection under the Americans with Disabilities Act.

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Appendix A

Tables A1- A 48

RADIOFREQUENCY RADIATION VERSUS DISTANCE

One Smart Meter

Table A1	60% Reflection	(1%-100% duty cycles in each table)
Table A2	100% Reflection	(1%-100% duty cycles in each table)
Table A3	1000% Reflection*	(1%-100% duty cycles in each table)
Table A4	2000% Reflection*	(1%-100% duty cycles in each table)

Multiple Smart Meters (Four)**

Table A5	60% Reflection	(1%-100% duty cycles in each table)
Table A6	100% Reflection	(1%-100% duty cycles in each table)
Table A7	1000% Reflection	(1%-100% duty cycles in each table)
Table A8	2000% Reflection	(1%-100% duty cycles in each table)

One Collector Meter

Table AA9	60% Reflection	(1%-100% duty cycles in each table)
Table A10	100% Reflection	(1%-100% duty cycles in each table)
Table A11	1000% Reflection	(1%-100% duty cycles in each table)
Table A12	2000% Reflection	(1%-100% duty cycles in each table)

One Collector Meter + 3 SM**

Table A13	60% Reflection	(1%-100% duty cycles in each table)
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Table A14	100% Reflection	(1%-100% duty cycles in each table)
Table A15	1000% Reflection	(1%-100% duty cycles in each table)
Table A16	2000% Reflection	(1%-100% duty cycles in each table)

**TABLES OF CRITICAL DISTANCES IN NURSERY (CRIB AT 11")
AND KITCHEN SINK (AT 28") FROM SMART METER
(A17-A48)**

Table A17	Nursery Set –
Table A18	One Smart Meter – Critical Distance 11" to baby in crib
Table A19	60%, 100%, 1000%, 2000% duty cycle
Table A20	<u>1% thru 90% duty cycle</u>
Table A21	Nursery Set –
Table A22	Eight Smart Meters – Critical Distance 11" to baby in crib
Table A23	60%, 100%, 1000%, 2000% reflection
Table A24	<u>1% thru 100% duty cycle</u>
Table A25	Nursery Set –
Table A26	One Collector– Critical Distance 11" to baby in crib
Table A27	60%, 100%, 1000%, 2000% reflection
Table A28	<u>1% thru 100% duty cycle</u>
Table A29	Nursery Set –
Table A30	One Collector Meter + 7 SM– Critical Distance 11" to baby crib
Table A31	60%, 100%, 1000%, 2000% reflection
Table A32	<u>1% thru 100% duty cycle</u>
Table A33	Kitchen Set –
Table A34	One Smart Meter – Critical Distance 28" to kitchen sink person

Table A35	60%, 100%, 1000%, 2000% reflection
Table A36	<u>1% thru 100% duty cycle</u>
Table A37	Kitchen Set -
Table A38	Eight Smart Meters – Critical Distance 28” to kitchen sink person
Table A39	60%, 100%, 1000%, 2000% reflection
Table A40	<u>1% thru 100% duty cycle</u>
Table A41	Kitchen Set –
Table A42	One Collector – Critical Distance 28” to kitchen sink person
Table A43	60%, 100%, 1000%, 2000% reflection
Table A44	<u>1% thru 100% duty cycle</u>
Table A45	Kitchen Set –
Table A46	One Collector + 7 SM – Critical Distance 28” to kitchen
Table A47	60%, 100%, 1000%, 2000% reflection
Table A48	<u>1% thru 100% duty cycle</u>

Appendix B Tables 1 – 33 of Report

Data Tables, FCC Violation Tables, Health Comparisons

Table 1	Radiofrequency Level at Each Duty Cycle and Reflection Factor at 6” in uW/cm2 (One Meter, Four Meters)
Table 2	Radiofrequency Level at Each Duty Cycle and Reflection Factor at 6” in uW/cm2 (One Collector, 1C + 3 SM)
Table 3	RF Level of Each Duty Cycle and Reflection Factor at 11” in uW/cm2 in the Nursery (One meter, Four meters)
Table 4	RF Level of Each Duty Cycle and Reflection Factor at 11” in uW/cm2 in

	the Nursery	(One Collector, 1C + 3 SM)
Table 5	RF Level of Each Duty Cycle and Reflection Factor at 28” in uW/cm ² in the Kitchen	(One Meter, Four Meters)
Table 6	RF Level of Each Duty Cycle and Reflection Factor at 28” in uW/cm ² in the Kitchen	(One Collector, 1C + 3 SM)
Table 7	Distance at which FCC Safety Limit is exceeded for 655 uW/cm ² time-weighted average limit	(One Meter, Four Meters)
Table 8	Distance at which FCC Safety Limit is exceeded for 571/624 uW/cm ² TWA limit	(One Collector, 1C+ 3 Smart Meters)
Table 9	Distance at which FCC Safety Limit is exceeded for peak power limit of 4000 uW/cm ² –	(1 SM, 4 SM; 1Collector, 1C + 3 SM)
Table 10	FCC Violations of the 655 uW/cm ² FCC limit at the face at 6”	(One Meter, Four Meters)
Table 11	FCC Violations of the 571/624 uW/cm ² FCC limit at 6” at the face	(One Collector, 1C + 3 SM)
Table 12	FCC Violations of the 655 uW/cm ² FCC limit at 11” in the Nursery	(One Meter, Four Meters)
Table 13	FCC Violations of the 571/624 uW/cm ² FCC limit at 11” in the Nursery	(One Collector, 1C + 3 SM)
Table 14	FCC Violations of the 655 uW/cm ² FCC limit at 28” in the Kitchen	(One Meter, Four Meters)
Table 15	FCC Violations of the 571/624 uW/cm ² FCC limit at 28” in the Kitchen	(One Collector, 1C + 3 SM)
Table 16	Potential FCC Violations of Peak Power Limit of 4000 uW/cm ² at 3”	(One SM, 4 SM)
Table 17	Potential FCC Violations of Peak Power Limit of 4000 uW/cm ² at 3”	(One Collector, 1C + 3 SM)
Table 18	Nursery Radiofrequency Radiation Level Associated with Inhibition of DNA Repair in Human Stem Cells (92.5 uW/cm ² with 24 and 72-hour exposure – Markova et al, 2009)	(One SM, 4 SM)
Table 19	Nursery Radiofrequency Radiation Level Associated with Inhibition of	

	DNA Repair in Human Stem Cells (92.5 uW/cm ² with 24 and 72-hour exposure – Markova et al, 2009) (One Collector, 1 C + 3 SM)
Table 20	Nursery Radiofrequency Radiation Level Associated with Pathological Leakage of the Blood-brain Barrier (0.4 to 8 uW/cm ² with chronic exposure - Persson et al, 1997) (One SM, 4 SM)
Table 21	Nursery Radiofrequency Radiation Level Associated with Pathological Leakage of the Blood-brain Barrier (0.4 to 8 uW/cm ² with chronic exposure - Persson et al, 1997) (One Collector, 1 C + 3 SM)
Table 22	Nursery Radiofrequency Radiation Level Associated with Adverse Health Symptoms from Cell Tower Studies (8 studies in total reporting sleep disruption, headache, fatigue, memory loss, concentration difficulties, irritability, increased cancer risk) (0.01 uW/cm ² with chronic exposure - Kundi, 2009; Khurana et al, 2010) (One SM, 4 SM)
Table 23	Nursery Radiofrequency Radiation Level Associated with Adverse Health Symptoms from Cell Tower Studies (8 studies in total reporting sleep disruption, headache, fatigue, memory loss, concentration difficulties, irritability, increased cancer risk) (0.01 uW/cm ² with chronic exposure - Kundi, 2009; Khurana et al, 2010) (One Collector, 1 C + 3 SM)
Table 24	Kitchen Radiofrequency Radiation Level Associated with Inhibition of DNA Repair in Human Stem Cells (92.5 uW/cm ² with 24 and 72-hour exposure – Markova et al, 2009) (One SM, 4 SM)
Table 25	Kitchen Radiofrequency Radiation Level Associated with Inhibition of DNA Repair in Human Stem Cells 92.5 uW/cm ² with 24 and 72-hour exposure – Markova et al, 2009) (One Collector, 1 C + 3 SM)
Table 26	Kitchen Radiofrequency Radiation Level Associated with Pathological Leakage of the Blood-brain Barrier (0.4 to 8 uW/cm ² with chronic exposure - Persson et al, 1997) (One SM, 4 SM)
Table 27	Kitchen Radiofrequency Radiation Level Associated with Pathological Leakage of the Blood-brain Barrier (0.4 to 8 uW/cm ² with chronic exposure - Persson et al, 1997) (One Collector, 1 C + 3 SM)
Table 28	Kitchen Radiofrequency Radiation Level Associated with Adverse Health Symptoms from Cell Tower Studies (8 studies in total reporting sleep disruption, headache, fatigue, memory loss, concentration difficulties, irritability, increased cancer risk) (0.01 uW/cm ² with chronic exposure - Kundi, 2009; Khurana et al, 2010) (One SM, 4 SM)
Table 29	Kitchen Radiofrequency Radiation Level Associated with Adverse Health

Symptoms from Cell Tower Studies (8 studies in total reporting sleep disruption, headache, fatigue, memory loss, concentration difficulties, irritability, increased cancer risk) (0.01 uW/cm^2 with chronic exposure - Kundi, 2009; Khurana et al, 2010) (One Collector, 1 C + 3 SM)

Table 30	Radiofrequency Radiation Level Exceeds Medtronic Metal Implant Advisory for MRI SAR Exposure of 0.1 W/Kg at Frequencies also Used in Smart Meters at 11” (One SM, 4 SM)
Table 31	Radiofrequency Radiation Level Exceeds Medtronic Metal Implant Advisory for MRI SAR Exposure of 0.1 W/Kg at Frequencies also Used in Smart Meters at 11” (One Collector, 1 C + 3 SM)
Table 32	Predicted RF levels exceed BioInitiative Report recommended limit of 0.1 uW/cm^2 (One SM, 4 SM)
Table 33	Predicted RF levels exceed BioInitiative Report recommended limit of 0.1 uW/cm^2 (1 Collector 1C + 3 SM)

Appendix C

Other Sources of Information on sensitivity of the eyes and testes

In the most recent proposed revisions of RF safety standards, the IEEE SC4 committee (2001) deliberated at length over the problem of peak power limits and non-uniform RF exposure with respect to the eye and testes. The quotes below come from committee drafts submitted in response to questions from the committee moderator.

ANSI/IEEE standards adopted in 1992 (C95.1-1992) and 1999 revisions June 2001 SC-4 Committee Minutes

These committee discussions are informative on the issue of particular organ sensitivity to RF, and unanswered questions and differences of opinion on the subject among members. They discussed vulnerable organs (eyes, testes) and metallic implants that can intensify localized RF exposures within the body and its tissues (see also discussion on metallic implants).

Question 20: Are there specific tissues or points within the body that have particularly high susceptibilities to local heating due to thermal properties in the immediate vicinity of the tissue?

Committee minutes include the following discussion on the particular sensitivities of ‘ball shaped’ organs including the eyes and testes.

“Eye balls are commonly regarded as the critical organ”

“In the range of a few GHz (gigahertz), resonances may occur in ball shaped eyes and testes. They are also electrically and thermally partly insulated from other tissues. Additionally these organs or some of their parts (lens) are thermally a little bit more vulnerable than other tissues.”

“(m)odeling has noted that rapid changes in dielectrics such as cerebral

spinal fluid in the ventricles of the brain and surrounding brain tissue lead to high calculated SARs. Secondly, exposure of the eye to microwave radiation can lead to increased temperature that is sufficient to damage tissues. The temperature rise will, of course, depend on the intensity of the irradiation, how well the energy is coupled into tissues, and how well the deposited energy is removed by normal mechanisms such as conduction and blood flow. Microwaves at the lower frequencies will be deposited deeper in the eye, while at higher frequencies they will be absorbed near the front surface of the eye. The eye does not efficiently remove heat deposited internally by microwave exposure. The main avenue of heat removal is conduction and blood flow through the retina and choroid. The lens has been thought to be the most vulnerable tissue since it has no blood flow. Other than conduction through the sclera and convection from the surface of the cornea, heat removal is poor compared to other body tissues. Because the lens is avascular it has been thought to be particularly sensitive to thermal effects of microwave exposure. These facts have led many investigators to postulate that the poor heat dissipation from within the eye of humans and other animals may lead to heat buildup and subsequent thermal damage.”

“Eyes do not have good blood circulation and testes have lower than body temperature.”

“These organs are not well-perfused, hence have been singled out for the exclusion.”

“Are the above numbers valid for all parts of the body in all exposure conditions over the time averaging period of the exposure? They (the basic limits) were derived in the manner you describe in body resonance conditions i.e. coherent exposure over the whole body length of a human. Could the limit values of SAR be increased for partial body exposure? Yes, but we do not have the data to make this decision. In the near field of a source, clearly the limit value will depend on frequency (depth of penetration), organ blood supply and tolerance of that organism to sustain a certain rate of temperature increase during the time averaging period and the environmental conditions. If you have to deal with possible pathologies of organs then matters become even more complicated, because you are dealing not only with heat physiology, but also with general pathology, whose books are much thicker than those on physiology.

Smart Meters; FCC Maximum Permissible Exposure Limits
for Electromagnetic Radiation, as Applicable to Smart Meters.
Dr. Ron Powell PhD.; 2013

August 4, 2013

Ronald M. Powell, Ph.D.

FCC Maximum Permissible Exposure Limits for Electromagnetic Radiation, as Applicable to Smart Meters

This document expresses my best understanding, as of the above date, of the FCC Maximum Permissible Exposure (MPE) limits, as applicable to Smart Meters. This understanding has been reached by reading the FCC document in the first footnote below, and by asking the FCC any questions that remained.

History

The FCC's most recent explanation of its current exposure limits was published in 1999 with the title "Questions and Answers about Biological Effects and Potential Hazards of Radiofrequency Electromagnetic Fields".¹ The current FCC exposure limits are based principally on a 1986 publication of the National Council on Radiation Protection and Measurements (NCRP). That publication is "Report No. 086 - Biological Effects and Exposure Criteria for Radiofrequency Electromagnetic Fields".² The NCRP was chartered by the U.S. Congress in 1964, but is not a Government agency and is not subject to oversight by the Congress.³

The current FCC exposure limits agree, in part, with those developed jointly in 1992 by the American National Standards Institute (ANSI) and the Institute of Electrical and Electronics Engineers (IEEE). The exceptions are "limits on exposure to power density above 1500 MHz, and limits for exposure to lower frequency magnetic fields."⁴ I will not address the ANSI and IEEE limits further here because the FCC limits are the ones applicable to Smart Meters.

The fact that the current exposure limits are based on the NCRP limits published in 1986, now 27 years ago,

¹ "Questions and Answers about Biological Effects and Potential Hazards of Radiofrequency Electromagnetic Fields", OET (Office of Engineering and Technology) Bulletin 56, Fourth Edition, Federal Communications Commission, August 1999.

(http://www.fcc.gov/Bureaus/Engineering_Technology/Documents/bulletins/oet56/oet56e4.pdf)

² This document is sold by the NCRP for \$56 in downloadable PDF form.

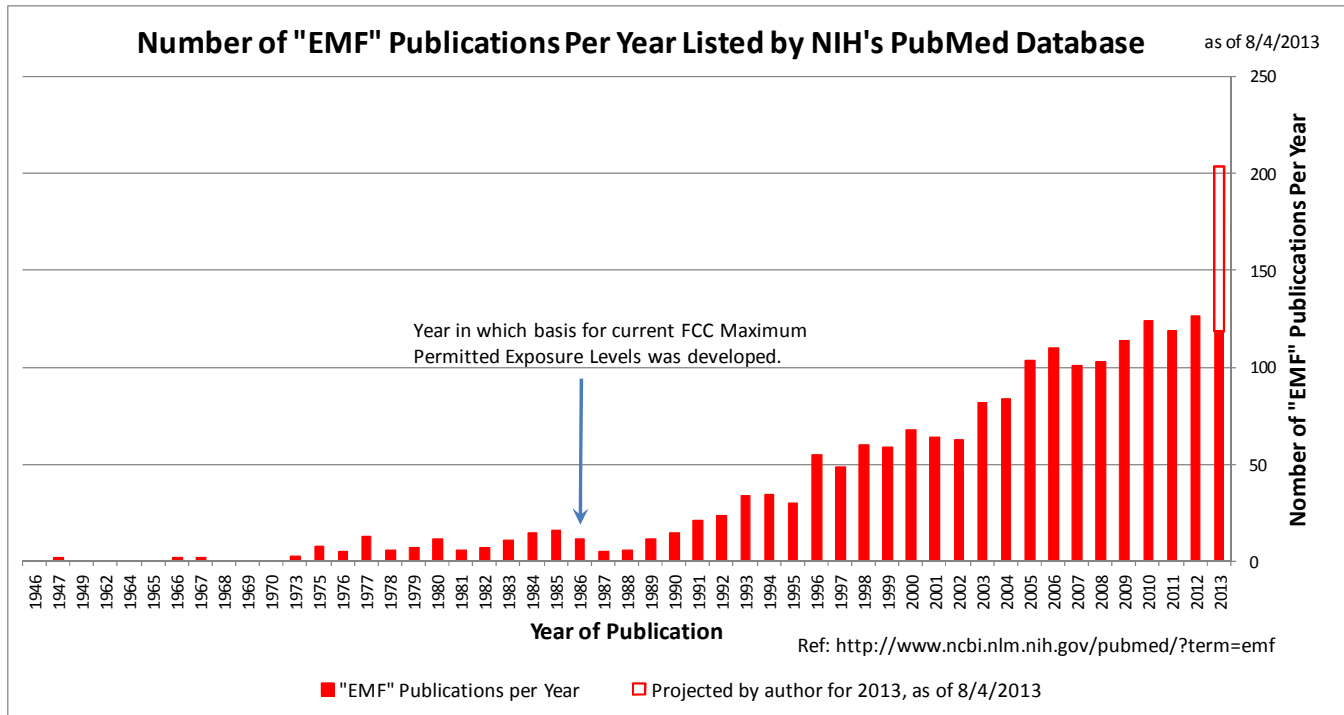
(<http://www.ncrppublications.org/Reports/086>).

³ The National Council on Radiation Protection and Measurements has this history: (1) in 1929, formed as the U.S. Advisory Committee on X-Ray and Radium Protection; (2) in 1946, renamed as the National Committee on Radiation Protection and Measurements; (3) in 1964, chartered by the U.S. Congress and renamed as the National Council on Radiation Protection and Measurements.

(https://en.wikipedia.org/wiki/National_Council_on_Radiation_Protection_and_Measurements)

⁴ In the document in my footnote 1 above, footnote 9 on page 12 explains: 'The FCC adopted limits for field strength and power density that are based on Sections 17.4.1 and 17.4.2, and the time-averaging provisions of Sections 17.4.1.1 and 17.4.3, of "Biological Effects and Exposure Criteria for Radiofrequency Electromagnetic Fields," NCRP Report No. 86, for frequencies between 300 kHz and 100 GHz (Reference 34). With the exception of limits on exposure to power density above 1500 MHz, and limits for exposure to lower frequency magnetic fields, these MPE limits are also based on the guidelines developed by the IEEE and adopted by ANSI. See Section 4.1 of ANSI/IEEE C95.1-1992, "Safety Levels with Respect to Human Exposure to Radio Frequency Electromagnetic Fields, 3 kHz to 300 GHz".' Further, again in the document in my footnote 1 above, footnote 4 on page 10 describes ANSI and IEEE as follows: "ANSI is a non-profit, privately funded, membership organization that coordinates development of voluntary national standards. The IEEE is a non-profit technical and professional engineering society."

means that those limits: (1) predated the emergence of the vast majority of devices currently emitting microwave radiation into our environment, including Smart Meters and other digital microwave devices; and (2) cannot be current with results of medical research on the bioeffects of electromagnetic radiation, including microwaves. The growth in the medical research literature since 1986 has been substantial and is illustrated by the following figure. That figure shows the number of publications addressing "EMF" (electromagnetic fields), as indexed in PubMed. PubMed is the on-line database of the medical research literature maintained by the National Institutes of Health. PubMed is the most comprehensive index to the medical research literature in the world.



On March 29, 2013, the FCC issued, for comment, proposed new exposure limits. While there are many changes, the key numbers that are currently applicable to Smart Meters, as described in the next section, appear to be unchanged.⁵

Current FCC Maximum Permissible Exposure Limits

Within the FCC's 1999 publication, "Questions and Answers...", the exposure limits of relevance to Smart meters are contained in Table 1(B), entitled "Limits for General Population/Uncontrolled Exposure", on page 15. Since Smart Meters operate in two principal frequency bands, one at about 900 MHz, and one at about 2400 MHz (which is equivalent to 2.4 GHz),⁶ just two lines from Table 1(B) apply to these frequency

⁵ Reassessment of Federal Communications Commission Radiofrequency Exposure Limits and Policies (ET Docket No. 13-84), and Proposed Changes in the Commission's Rules Regarding Human Exposure to Radiofrequency Electromagnetic Fields (ET Docket No. 03-137), released March 29, 2013. See Table 1 on pages 98, 110, and 122 of the PDF version. (<http://www.fcc.gov/document/fcc-review-rf-exposure-policies>)

⁶ The FOCUS AXR-SD and the I-210+c both have FCC-ID OWS-NIC514, which indicates that they send and receive information in two microwave frequency ranges: (1) 902.3 to 926.9 MHz, and (2) 2405.8 to 2480.9 MHz. MHz means millions of hertz. 1 hertz is one cycle per second. The microwave output power in the first frequency range is 0.968 watts. The microwave output power in the second frequency range is 0.147 watt. The sum of these two is 1.115 watts. Landis+Gyr and PEPCO declined to answer a question as to whether the two frequency ranges are used simultaneously. I assume that they are and have summed their outputs as a result

bands, as shown below.

Extracted from FCC Table 1 (B) Limits for General Population/Uncontrolled Exposure

<i>line</i>	Frequency Range	Power Density	Averaging Time
	MHz	mW/cm ²	minutes
(a)	300-1500	f/1500	30
(b)	1500-100,000	1.0	30
f is the frequency in MHz			

Line (a) above applies to the 900 MHz frequency band used by Smart Meters. That line indicates that the permitted power density increases as the frequency increases. At 900 MHz, the maximum permitted power density is (900/1500) mW/cm², which is 0.6 mW/cm². Line (b) applies to the 2400 GHz frequency band of Smart Meters, and the maximum permitted power density is 1 mW/cm², independent of frequency. With this understanding, Table 1(B) can be applied to Smart Meters, as shown below. I have added columns that translate mW/cm² into mW/m² and into W/m² for comparison with data from other sources.⁷

Limits for General Population/Uncontrolled Exposure for Smart Meters

Frequency	Power Density			Averaging Time
MHz	mW/cm ²	mW/m ²	W/m ²	minutes
900	0.6	6,000	6	30
2400	1.0	10,000	10	30

Interpretation of the Tables

Here is how to interpret the table. For easy reference, call the power-density levels in the table the **absolute levels**, consistent with the terminology that the FCC uses.

- (1) A continuous exposure of an individual is considered compliant with the FCC limits if that exposure remains at or below the specified absolute level for that frequency, even if that exposure continues indefinitely.
- (2) A discontinuous exposure, such as that produced by a digital signal, is considered compliant with the FCC limits, if the average exposure over a period of 30 minutes is at or below the specified absolute level for that frequency. That is, if the exposure rises above the absolute level for that frequency, even for a moment, then the average level, over a 30 minute period, must be at or below the absolute level. Stated another way, periods of exposure at higher than the absolute level must

(<http://stopsmartmeters.org/wp-content/uploads/2012/01/OWS-NIC514-FCC-specifications.pdf>).

⁷ 1 meter (m) equals 100 centimeters (cm). So 1 square meter (m²) equals 10,000 square centimeters (cm²). 1 watt (W) equals 1000 milliwatts (mW).

be accompanied, in any given 30 minute interval, by periods of exposure far enough below the absolute level that the average over 30 minutes does not exceed the absolute level.

Because of (2) above, the level of exposure permitted for short intervals of time may greatly exceed the absolute level. Consider an exposure that is ON for less than 30 minutes and the is OFF for the rest of the 30 minutes. Here are some specific patterns that would be permitted, no matter how many times the 30 minute pattern is repeated.

Examples of FCC Permitted Exposure Levels at 900 MHz

ON Time	OFF Time	ON Time Fractions	Permitted Power Density During ON Time		
minutes:seconds	minutes:seconds		mW/cm ²	mW/m ²	W/m ²
30:00	00:00	1	0.6	6,000	6
01:00	29:00	1/30	18	180,000	180
00:20	29:40	1/90	54	540,000	540
00:01	29:59	1/1800	1080	10,800,000	10,800

Examples of FCC Permitted Exposure Levels at 2400 MHz

ON Time	OFF Time	ON Time Fractions	Permitted Power Density During ON Time		
minutes:seconds	minutes:seconds		mW/cm ²	mW/m ²	W/m ²
30:00	00:00	1	1	10,000	10
01:00	29:00	1/30	30	300,000	300
00:20	29:40	1/90	90	900,000	900
00:01	29:59	1/1800	1800	18,000,000	18,000

Discussion of Examples of Permitted Exposure Levels

The surface area of a human being is about 2 m².⁸ So the surface area presented to a microwave wave coming from the front or the back is about 1 m². Consider the W/m² column in the above table. An oncoming microwave wave will transfer to a human being the number of watts shown in the W/m² column. Consider the three examples at 2400 GHz that are contained in the preceding table:

- (1) A microwave wave with a power density of 300 W/m² will transfer 300 watts of power to a human being. That is the amount of power required to run 3 light bulbs of 100 watts each. Such

⁸ The surface of a man is about 1.9 m². The surface of a woman is about 1.6 m². Both according to Wikipedia (http://en.wikipedia.org/wiki/Body_surface_area)

exposure would be compliant with the FCC exposure limits, if continued for 1 minute or less.

- (2) A microwave wave with a power density of 900 W/m^2 will transfer 900 watts of power to a human being. This is somewhat more than the amount of microwave power, 700 watts, generated by the typical consumer microwave oven.⁹ So exposure of a human being to a microwave wave with somewhat greater power than a microwave oven would be compliant with the FCC exposure limits, if continued for 20 seconds or less.
- (3) A microwave wave with a power density of $18,000 \text{ W/m}^2$ will transfer 18,000 watts of power to a human being. This is between one-third and one-half of the maximum power that the typical home can draw (48,000 watts) without tripping its master circuit breaker (200 amperes AC at 240 volts AC). Such exposure would be compliant with the FCC exposure limits, if continued for 1 second or less.

For each of the three examples given above, the level of exposure cited, with the associated duration, could be repeated once each 30 minutes, indefinitely, and still be in compliance with the FCC exposure limits.

Finally, exposure of a human being at even higher power levels than discussed here is permitted by the FCC exposure limits, if the duration of that exposure is sufficiently short.

These examples indicate that the current FCC exposure limits permit exposure levels to microwave radiation that challenge common sense. While I have not yet read the 1986 NCRP publication on which the current FCC exposure limits are based, I do wonder what sort of scientific basis I will find there that could justify such extraordinary power levels, even in 1986.

Peak versus Average Exposure Levels

Given the above discussion, the concerns raised by the FCC exposure limits arise not only from high permitted absolute levels, but also from the concept of time averaging, which does, indeed, seem based on thermal thinking only. When the level of microwave radiation exposure is averaged over time, the implicit assumption being made is that the body reacts the same way to:

- (1) a burst of microwave radiation of high intensity but short duration
- (2) a hypothetical continuous level of radiation at a lower level but with the same average value over the same period of time

So a real burst-exposure event is translated into a hypothetical continuous exposure event, and the effect of that hypothetical exposure event is taken to represent the effect of the real event. Yet, everyday life suggests that the body may not react the same way to these two different circumstances. Ask a boxer if the following two events are of equal concern: (1) a series of “average” punches over the length of a fight, or (2) a single punch, somewhere during the fight, with the energy of the sum of all the “average” punches.

Thermal versus Non-Thermal Effects on Humans

The FCC developed two sets of exposure limits, one for Occupational/Controlled Exposure and one for the General Population/Uncontrolled Exposure. Only the latter have been discussed here because only they

⁹ The typical consumer microwave oven consumes 1100 watts of electrical power and produces 700 watts of microwave power. (http://en.wikipedia.org/wiki/Microwave_oven)

apply to Smart Meters installed on residences. My understanding is that the Occupational set were based principally on thermal (heating) effects on the human body; but the existence of possible non-thermal effects was recognized back then, according to the FCC. So when the limits for the General Population were developed, a factor of five reduction in permitted levels, relative to the Occupational set, was implemented for the General Population set, for two reasons, again according to the FCC: (1) to allow for non-thermal effects, and (2) to provide a safety margin because exposure levels in the General Population would not generally be known as well as the levels in an occupational setting.

So the FCC exposure limits made some recognition of the existence of non-thermal effects. But I must wonder if the knowledge of non-thermal effects, back in 1986, was adequate to support that factor of five.

Applying the FCC Exposure Limits

Additional information on applying the FCC exposure limits is contained in "Evaluating Compliance with FCC Guidelines for Human Exposure to Radiofrequency Electromagnetic Fields", OET Bulletin 65, Edition 97-01, published in August 1997.¹⁰

Legal Presentation of the FCC Exposure Limits

The current FCC exposure limits are presented, in legal form, in the Code of Federal Regulations in 47 CFR 1.1307¹¹ and 47 CFR 1.1310.¹² The latter publication is the one that contains Table 1 which also appears in the FCC's 1999 publication "Questions and Answers...", OET Bulletin 56, introduced above.

¹⁰ (http://www.fcc.gov/Bureaus/Engineering_Technology/Documents/bulletins/oet65/oet65.pdf)

¹¹ 47 CFR 1.1307

(<http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=12&SID=049f730b665fd682e5a64add8d6b80b4&ty=HTML&h=L&r=SECTION&n=47y1.0.1.1.2.9.192.7>)

¹² 47 CFR 1.1310

(<http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=12&SID=049f730b665fd682e5a64add8d6b80b4&ty=HTML&h=L&r=SECTION&n=47y1.0.1.1.2.9.192.10>)

Smart Meters - Radiation Sickness; Symptoms after
Exposure to Smart Meter Radiation.
Dr. Ron Powell PhD.; 2015

Symptoms after Exposure to Smart Meter Radiation

People from coast to coast in the USA, and from one side of the world to the other, are becoming ill after exposure to the radiofrequency radiation emitted by Wireless Smart Meters. Attached are the results of two surveys of the symptoms being reported.

The first survey comes from the United States and includes 318 respondents, from 28 states from California to New York, and addresses wireless utility meters that are principally Wireless Smart Meters. The second survey comes from the other side of the world, Victoria, Australia, and includes 92 respondents, and addresses Wireless Smart Meters exclusively. Altogether, 410 adults and children are included. Both surveys report new or worsened symptoms after exposure to the radiation from Wireless Smart Meters in the respondent's environment.

The attached two bar graphs show the percentage of respondents who experienced each symptom. Most individuals in both surveys developed multiple symptoms. Each bar graph is followed by one page of additional information written by the person who analyzed the survey data.

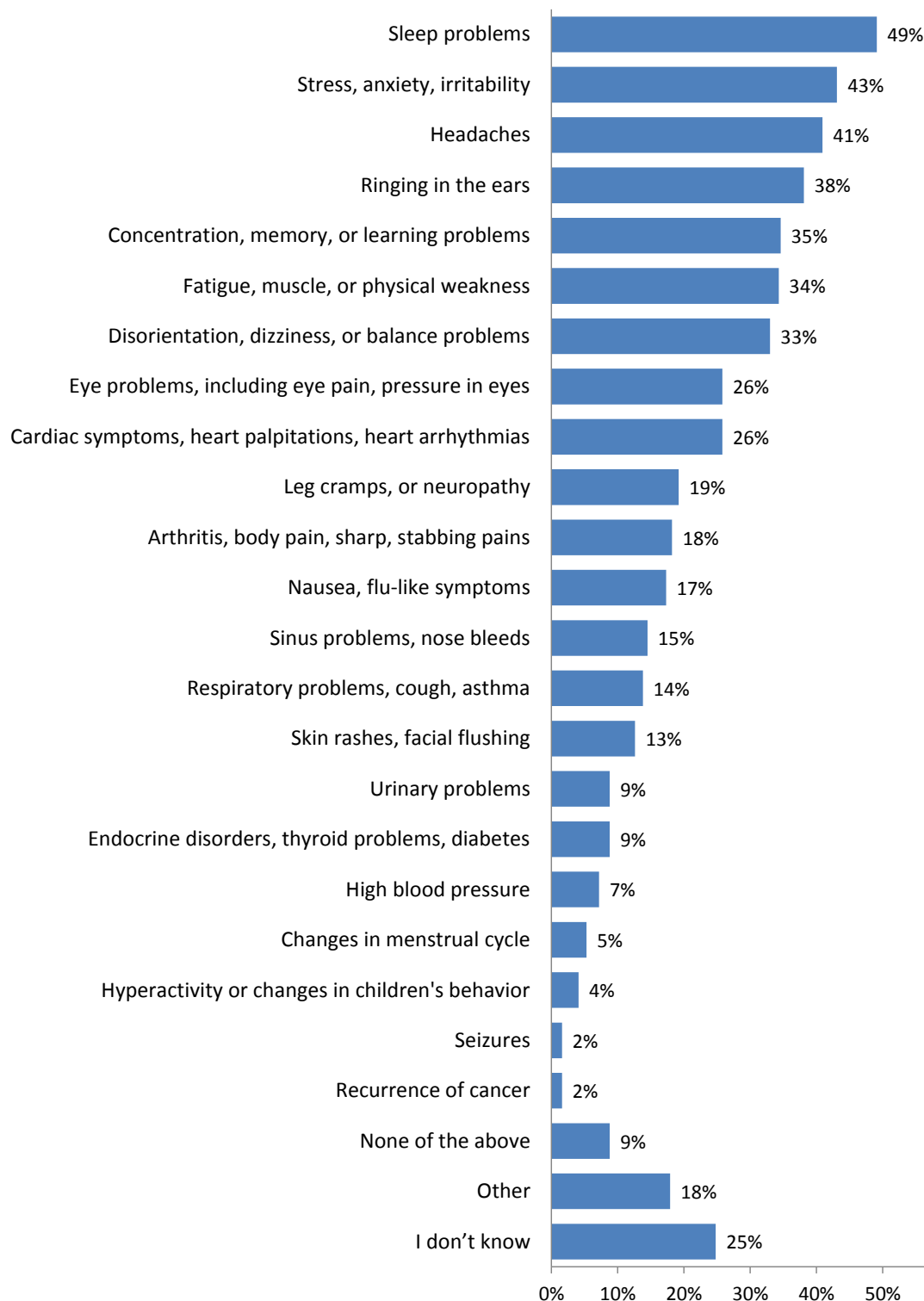
The two surveys group symptoms into somewhat different clusters, but many of these clusters are similar enough to enable comparison between the surveys. Of the top seven clusters of symptoms in both surveys, six clusters are similar in description and nearly identical in order of occurrence: (1) sleep disruption; (2) headaches; (3) ringing or buzzing in the ears; (4) fatigue; (5) loss of concentration, memory, or learning ability; and (6) disorientation, dizziness, or loss of balance.

The surveys do not tell us how likely a given individual is to become symptomatic after exposure to the radiation from Wireless Smart Meters. But the surveys do tell us which symptoms a person who does become symptomatic is most likely to experience. The many symptoms found reflect the many body systems that are disrupted by such radiation.

A symptom, of course, is something that can be sensed by an individual, and thus can serve as a warning. Unfortunately, many health effects caused by radiofrequency radiation have no early symptoms and thus give no warning. These health effects become evident only after significant harm has been done. Examples are DNA damage, cancer, and reproduction effects.

¹ Ronald M. Powell is a retired career U.S. Government scientist. He holds a Ph.D. in Applied Physics from Harvard University. During his Government career, he worked for the Executive Office of the President, the National Science Foundation, and the National Institute of Standards and Technology.

New or Worsened Symptoms Reported by 318 Individuals after Exposure to Wireless Utility Meters in the USA¹



¹ Ed Halteman, Ph.D., statistics, Wireless Utility Meter Safety Impacts Survey: Final Results Summary, September 13, 2011, p. 22 (<http://emfsafetynetwork.org/wp-content/uploads/2011/09/Wireless-Utility-Meter-Safety-Impacts-Survey-Results-Final.pdf>). 97 percent of respondents to full survey were in the USA, from 28 states, with most in California (78 percent) and New York (16 percent). In the Final Results Summary, the four clusters of symptom's with the fewest responses (2 to 5 percent each, totaling 13 percent) were included in "Other" but are broken out separately in the above bar graph, reducing the responses listed as "Other" (from 31 percent to 18 percent, a reduction of 13 percent).

Wireless Utility Meter Safety Impacts Survey

OBJECTIVES

- To investigate reported public health and safety complaints about wireless utility meters.
- To evaluate the impacts on health and safety due to wireless utility meters.
- To determine whether further study is warranted.

METHODS

- Survey was designed by the EMF Safety Network (Network).
- The survey was circulated online through various social media outlets including Network's email list, Facebook, and the California EMF Safety Coalition (a discussion group).
- The survey was also posted on Network's website: www.emfsafetynetwork.org where visitors were invited to take the survey.
- 443 responses were received from 7/13/2011 through 9/2/2011. *(318 of the 443 answered the health questions that formed the basis for the bar chart on symptoms. RMPowell)*
- Network commissioned Survey Design and Analysis (SDA) to provide this report of the survey findings.

RESPONDENT MAKEUP

- 93% are over 40 years old and 43% are over 60 years old.
- 73% are women.
- 78% are from California.
- 68% have Pacific Gas and Electric (PG&E) as their utility provider.
- 49% are EMF Sensitive.
- 41% have had a new wireless meter installed in their home; of these . . .
 - 56% have had it installed for at least six months
 - 89% have electric meters, 53% gas meters and 10% water meters
 - 35% saw an increase in their utility bill
 - 26% have experienced some type of interference
 - 8% experienced burned out appliances or damaged electronics including TV, stereo, computer, refrigerator and other.
- 76% indicated they have wireless utility meters installed in their neighborhood, town or city.
 - 44% near their home
 - 36% in town

TOP HEALTH ISSUES SINCE NEW METERS INSTALLED

- Sleep problems (mentioned by 49%)
- Stress, anxiety and irritability (43%)
- Headaches (40%) *(Listed as 41% on symptoms bar graph, rounded up from 40.9%. RMPowell)*
- Ringing in the ears (38%)
- Heart problems (26%)

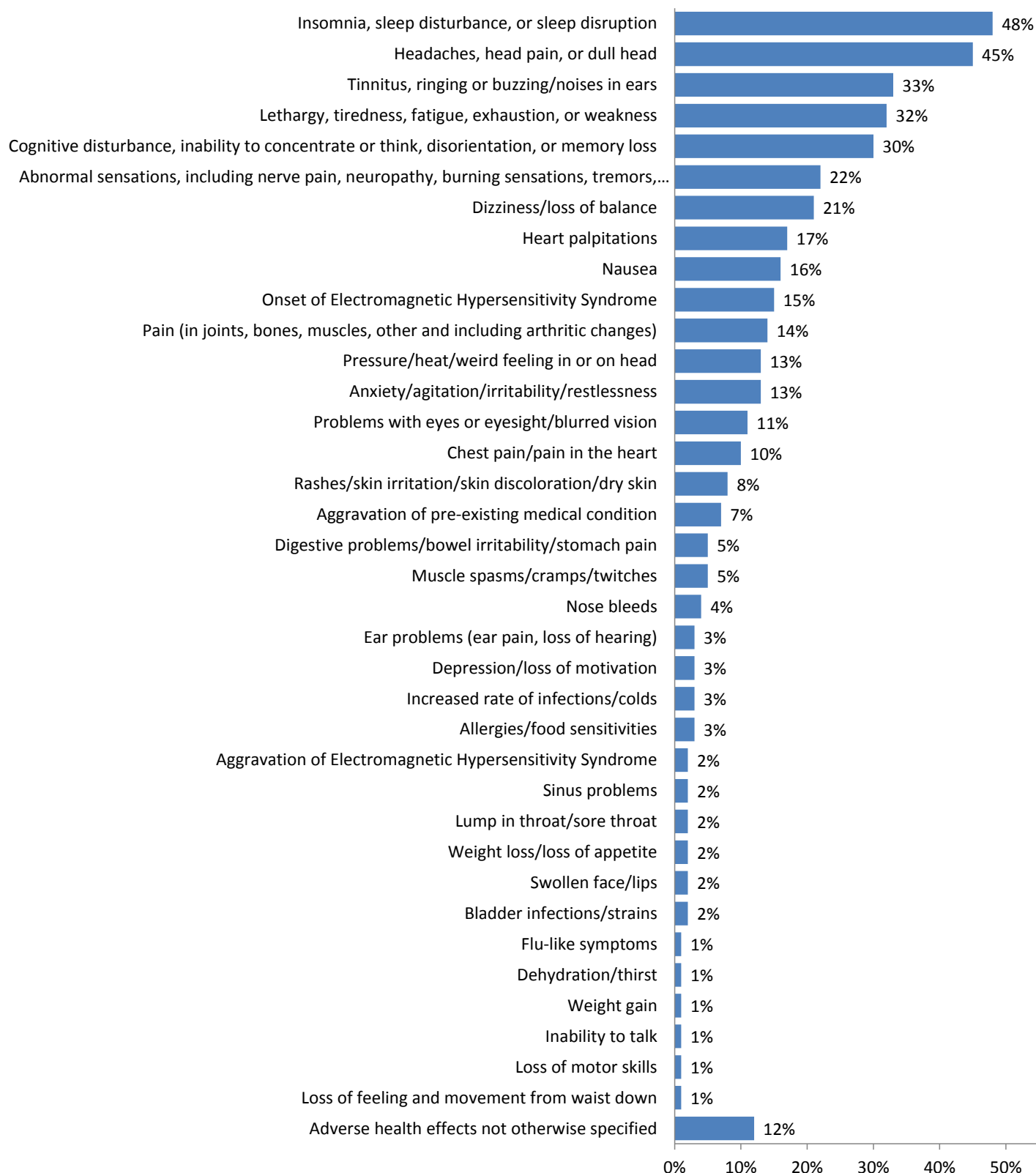
UTILITY and PUBLIC UTILITY COMMISSION INTERACTIONS *(Title inserted by RMPowell.)*

- 40% (111 people) of those having wireless meters in their homes or community have complained to their utility provider.
 - 96% of these people were either "Unsatisfied" or "Very Unsatisfied" with the handling of their complaint.
- 32% (88 people) complained to the utilities commission.
 - 96% of these people were either "Unsatisfied" or "Very Unsatisfied" with the handling of their complaint
- 94% of respondents want to retain or restore their analog meters and 92% of these respondents do not think they should have to pay any additional money.

STATISTICAL TESTING SHOWS THE TOP HEALTH SYMPTOMS ARE POSITIVELY ASSOCIATED WITH

- EMF Sensitivity
- Wireless meters installed in the home

New or Worsened Symptoms Reported by 92 Individuals after Exposure to Wireless Smart Meters in Australia¹



¹ Federica Lamech, MBBS, Self-Reporting of Symptom Development from Exposure to Radiofrequency Fields of Wireless Smart Meters in Victoria, Australia: A Case Series. Alternative Therapies, Nov/Dec 2014, Vol. 20, No. 6, pages 28-38. NIH PMID 25478801 (<http://www.alternative-therapies.com> and <http://www.ncbi.nlm.nih.gov/pubmed/25478801>).

Altern Ther Health Med. 2014 Nov-Dec;20(6):28-39.

Self-reporting of symptom development from exposure to radiofrequency fields of wireless smart meters in Victoria, Australia: a case series.

Lamech F.

Abstract

CONTEXT:

In 2006, the government in the state of Victoria, Australia, mandated the rollout of smart meters in Victoria, which effectively removed a whole population's ability to avoid exposure to human-made high-frequency nonionizing radiation. This issue appears to constitute an unprecedented public health challenge for Victoria. By August 2013, 142 people had reported adverse health effects from wireless smart meters by submitting information on an Australian public Web site using its health and legal registers.

OBJECTIVE:

The study evaluated the information in the registers to determine the types of symptoms that Victorian residents were developing from exposure to wireless smart meters.

DESIGN:

In this case series, the registers' managers eliminated those cases that did not clearly identify the people providing information by name, surname, postal address, and/or e-mail to make sure that they were genuine registrants. Then they obtained consent from participants to have their deidentified data used to compile the data for the case series. The author later removed any individual from outside of Victoria.

PARTICIPANTS:

The study included 92 residents of Victoria, Australia.

OUTCOME MEASURES:

The author used her medical experience and judgment to group symptoms into clinically relevant clusters (eg, pain in the head was grouped with headache, tinnitus was grouped with ringing in the ears). The author stayed quite close to the wording used in the original entries. She then calculated total numbers and percentages for each symptom cluster. Percentages were rounded to the nearest whole number.

RESULTS:

The most frequently reported symptoms from exposure to smart meters were (1) insomnia, (2) headaches, (3) tinnitus, (4) fatigue, (5) cognitive disturbances, (6) dysesthesias (abnormal sensation), and (7) dizziness. The effects of these symptoms on people's lives were significant.

CONCLUSIONS:

Review of some key studies, both recent and old (1971), reveals that the participants' symptoms were the same as those reported by people exposed to radiofrequency fields emitted by devices other than smart meters. Interestingly, the vast majority of Victorian cases did not state that they had been sufferers of electromagnetic hypersensitivity syndrome (EHS) prior to exposure to the wireless meters, which points to the possibility that smart meters may have unique characteristics that lower people's threshold for symptom development.

PMID: 25478801

Kit Weaver Comments, Sep. 3, 2013

FCC 13-39

**Before the
Federal Communications Commission
Washington, D.C. 20554**

In the Matter of	)	
	)	
Reassessment of Federal Communications	)	ET Docket No. 13-84
Commission Radiofrequency Exposure Limits and	)	
Policies	)	
	)	
Proposed Changes in the Commission's Rules	)	ET Docket No. 03-137
Regarding Human Exposure to Radiofrequency	)	
Electromagnetic Fields	)	
	)	

To: Office of the Secretary
Federal Communications Commission (FCC), Washington, DC 20554

As officially presented in the Federal Register/ Vol. 78, No. 107 / Tuesday, June 4, 2013 / Proposed Rules. Federal Communications Commission, 47 CFR Parts 1, 2, 15, 24, 25, 27, 73, 90, 95, 97, and 101 [ET Docket Nos. 03-137 and 13-84; FCC 13-39], Reassessment of Exposure to Radiofrequency Electromagnetic Fields Limits and Policies, Federal Communications Commission

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August 31, 2013

JA 06707

Comments of Kit T. Weaver
Submitted August 31, 2013

Introduction

1. Kit T. Weaver submits these comments in response to the publication of FCC 13-39, First Report and Order, Further Notice of Proposed Rule Making and Notice of Inquiry (ET Docket No. 13-84 and ET Docket No. 03-137) released March 29, 2013, by the FCC and published in the Federal Register on June 4, 2013.
2. Mr. Weaver has earned a B.S. in Engineering Physics and an M.S. in Nuclear Engineering with a specialty in radiation protection, both degrees received from the University of Illinois at Urbana-Champaign. He was employed by a leading electric utility for over 25 years. He served in various positions, including Station Health Physicist, Senior Health Physicist, corporate Health Physics Supervisor, and corporate Senior Technical Expert for Radiobiological Effects. He was considered qualified by the Nuclear Regulatory Commission (NRC) as a site Radiation Protection Manager in accordance with USNRC Regulatory Guide 1.8. Mr. Weaver served in various on-call emergency response organization positions including Health Physics Director and Environmental Manager. He served as a member of the corporate Radiation Advisory Committee which dealt with radiation protection policy and litigation issues that included interaction with the company's General Counsel and company Medical Director. Mr. Weaver has received specialized training in radiation biophysics, radiological emergency response planning and preparedness, and project management. He has participated in various industry committees and activities related to the Edison Electric Institute, the Institute for Nuclear Power Operations, the American Nuclear Insurers, and the Nuclear Energy Institute. Mr. Weaver is a member of the Tau Beta Pi Association and is also a member of the Honor Society of Phi Kappa Phi. He is a plenary member of the Health

Physics Society and has three times served as President of the Midwest Chapter of the Health Physics Society. Mr. Weaver has retired from full time employment, and under the name of SkyVision Solutions, currently operates a website dedicated to raising public awareness about the benefits, costs, and risks associated with smart grid systems as well as the potential hazards related to radiofrequency (RF) radiation emissions from all wireless devices, including smart meters.

3. Incorporated by reference are prior comments submitted by Kit T. Weaver on February 6, 2013, pertaining to FCC 12-152, ET Docket No. 03-137 and WT Docket No. 12-357. Those comments were targeted specifically for footnote 95 of paragraph 53 of WT Docket No. 12-357, where it states, in part, that, “a few commenters stated that the Commission’s RF safety rules are inadequate because the rules are based on physics rather than biological studies. ... To the extent that commenters desire to change the RF standards, commenters can file in this proceeding...” Comments provided were generally applicable for all wireless devices but did focus on wireless electrical usage “smart” meters installed on private property by electric utilities. Comments substantiated the following recommended actions for the FCC:
 - The FCC should promptly implement and fully “endorse” common sense precautionary measures to slow the exponential growth of RF exposure to our population caused by the increasing number of wireless devices present in our society.
 - The FCC should promptly revise/ issue equipment authorizations for wireless smart meters to clearly stipulate that installation of such devices on individual homes requires the property owner’s consent, giving the homeowners the opportunity to use the precautionary principle in an effort to limit exposure. Such measures would be totally consistent with the implied concept of “voluntary use” of wireless technologies in the home.

4. Incorporated by reference are prior “reply” comments submitted by Kit T. Weaver on March 5, 2013, pertaining to FCC 12-152, ET Docket No. 03-137 and WT Docket No. 12-357. Those comments focused on potential conflicts of interest of the FCC with the telecommunications industry which may affect the Commission’s ability to objectively uphold its current responsibility to establish radiofrequency exposure guidelines given to it under Congressional authority. It was recommend that the FCC either vigorously uphold the responsibility to establish appropriate RF exposure guidelines or advocate that Congress direct another Federal agency (such as the Environmental Protection Agency) to have central authority and resources to properly execute this critical responsibility.
5. Comments provided below for the current “Notice of Inquiry” (NOI) are presented in the order of selected NOI numbered paragraphs (as listed in the *Federal Register*) with the number of the paragraph appearing at the beginning of each comment.

Comments on the Reassessment of Current RF Exposure Limits and Policies

1. **NOI Paragraph 47, Comment on “Confidence in the Current Exposure Limits.”**

The FCC introduces it’s NOI by stating it has “confidence in the current exposure limits.” With the mounting evidence of adverse biological effects occurring at levels below the current FCC exposure guidelines, such **confidence** is unfounded. For the sake of brevity, four examples will be provided to demonstrate the validity of this assertion.

- 1) A recent report from the European Environment Agency, EEA Report No 1/2013, states, “It is remarkable that the IARC carcinogenic classification does not seem to have had any significant impact on governments’ perceptions of their responsibilities to protect public health from this widespread source of radiation, especially given the

ease with which exposures can be reduced.” It is as though the FCC and other similar organizations have essentially ignored this important classification by the International Agency for Research on Cancer (IARC) that all radiofrequency emissions are now considered as possibly carcinogenic. This reflects a cognitive bias towards not taking any action in response to evidence that would otherwise support at least a questioning attitude regarding the current exposure guidelines.

- 2) In April 2010, the “President’s Cancer Panel” issued a report entitled, *Reducing Environmental Cancer Risk*. The report recommends that a precautionary, prevention-oriented approach be taken to replace our current reactionary approach to regulating environmental contaminants in which human harm must generally be proven before action is taken to reduce or eliminate exposure. The entire report can be found at the following link:

http://deainfo.nci.nih.gov/ADVISORY/pcp/annualReports/pcp08-09rpt/PCP_Report_08-09_508.pdf.

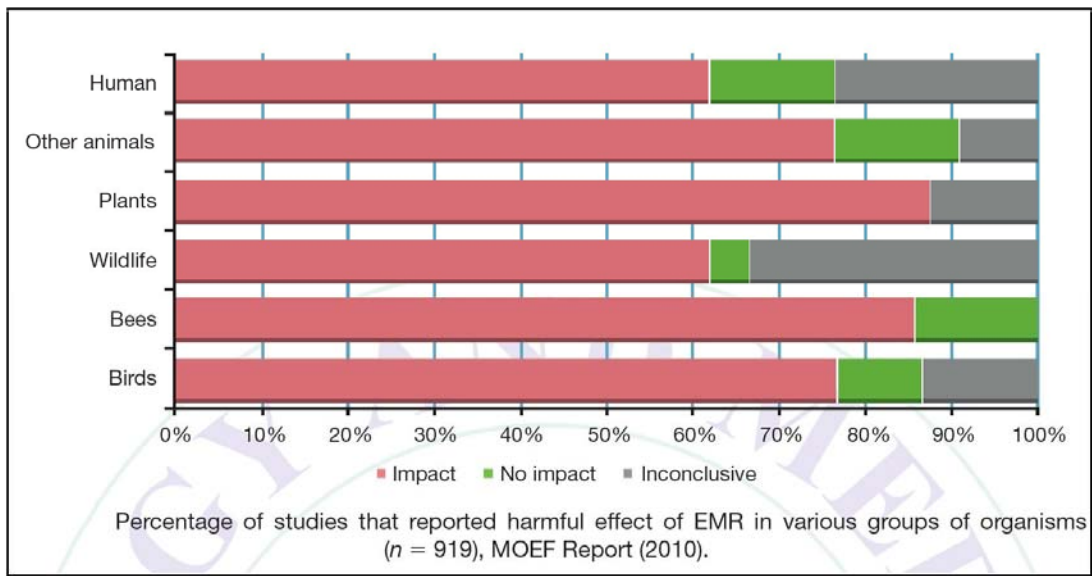
Selected quotations are provided below:

- “Weak laws and regulations, inefficient enforcement, regulatory complexity, and fragmented authority allow avoidable exposures to known or suspected cancer-causing and cancer-promoting agents to continue and proliferate in the workplace and the community. Existing regulations, and the exposure assessments on which they are based, are outdated in most cases, and many known or suspected carcinogens are completely unregulated. Enforcement of most existing regulations is poor. In virtually all cases, regulations fail to take multiple exposures and exposure interactions into account.”

- “Industry has exploited regulatory weaknesses, such as government’s reactionary (rather than precautionary) approach to regulation.”
 - “An alternative approach to regulation that supports primary cancer and other disease prevention is precautionary.”
 - “When credible evidence exists that there may be a hazard, a precautionary approach should be adopted and alternatives should be sought to remove the potential hazard and still achieve the same social benefit. Such an approach acknowledges the uncertainty of identifying cancer risks in complex, poorly understood environmental systems.”
 - “A precautionary, prevention-oriented approach should replace current reactionary approaches to environmental contaminants in which human harm must be proven before action is taken to reduce or eliminate exposure.”
- 3) Based upon currently available literature, it is not difficult to find credible evidence that supports the viewpoint that it is justified to conclude that man-made RF-EMF radiation emissions are causing adverse health effects among all types of living things including, humans, frogs, honey bees, birds, bats, trees, cows, and other wildlife. The Indian “Ministry of Environment and Forest (MOEF) set up an Inter-Ministerial Committee (IMC) to study the effects of RF-EMF radiations on wildlife and concluded that out of the 919 research papers collected on birds, bees, plants, other animals, and humans, 593 showed impacts, 180 showed no impacts, and 196 were inconclusive studies.” Source: *Biology and Medicine*, Vol. 4, No. 4 (2012), October-December, Published: 7th Jan 2013, entitled, “Impacts of Radio-Frequency Electromagnetic Field (RF-EMF) from Cell Phone Towers and Wireless Devices on Biosystem and

Ecosystem – a Review.” This is an “open-access” article available at the following link:

http://biomedonline.com/Articles/Vol4_4_2012/Vol4_4_202-216_BM-8.pdf. Refer to the figure presented below:



- 4) In December 2012, the *BioInitiative 2012 Report* – published by 29 highly respected health professionals from ten countries – comprehensively reviewed over 1,800 studies in the previous five years. The report concluded that “exposure to EMF and radiofrequency radiation (RFR) produces biological effects and adverse health effects at levels significantly below existing public exposure standards.” Overall, the studies were said to report:

- Abnormal gene transcription;
- Genotoxicity and single-and double-strand DNA damage;
- Stress proteins because of the fractal RF-antenna like nature of DNA;
- Chromatin condensation and loss of DNA repair capacity in human stem cells;
- Reduction in free-radical scavengers – particularly melatonin;

- Neurotoxicity in humans and animals;
- Carcinogenicity in humans;
- Serious impacts on human and animal sperm morphology and function;
- Effects on the fetus, neonate and offspring;
- Effects on brain and cranial bone development in the offspring of animals that are exposed to cell phone radiation during pregnancy; and
- Findings in autism spectrum disorders consistent with EMF/RFR exposure.

Finally, the *BioInitiative 2012 Report* stated that: “There is reinforced scientific evidence of risk from chronic exposure to low-intensity electromagnetic fields and to wireless technologies.”

2. **NOI Paragraph 53, Comment on Exposure Limits and Significance of IARC Declaration.**

Although the FCC previously stated confidence in its exposure guidelines, this NOI paragraph does thankfully request comment on whether “its current standards should be modified in any way.” Based upon the limited evidence supplied so far in these prepared comments and additional evidence that can easily be compiled, the overwhelming response should be, “Yes, current standards do need to be modified.” However, such a change or modification would take time and be performed in stages. It must start with an acknowledgment that adverse health effects do occur at levels below the current FCC exposure guidelines. Beyond that, the recommended approach should take two separate but complementary paths:

- 1) Begin development of new biologically based public safety limits in concert with other qualified governmental agencies and professional organizations which would include representation from the medical community. The current FCC thermally-based exposure guidelines

are useful to prevent tissue heating and damage but do not protect against chronic exposures to biologically active non-thermal non-ionizing radiation. [This process to develop credible biologically based limits will understandably take time. In the short term, a precautionary approach can be taken to at least reduce unnecessary RF exposure to our population.]

- 2) Endorse a precautionary approach to implement common sense measures that will help slow the exponential growth of RF exposure to our population caused by the increasing number of wireless devices present in our society. This approach will be discussed in more detail in subsequent paragraphs.

Regarding the 2011 IARC declaration that RF fields are possibly carcinogenic, it has been disappointing that the FCC and other standards-related organizations have effectively ignored the significance of this event. For all the “wordsmithing” that probably went into creation of the full 500 page IARC Monograph, there was one revealing paragraph that should not be overlooked:

“Although it has been argued that RF radiation cannot induce physiological effects at exposure intensities that do not cause an increase in tissue temperature, it is likely that not all mechanisms of interaction between weak RF-EMF (with the various signal modulations used in wireless communications) and biological structures have been discovered or fully characterized. Biological systems are complex and factors such as metabolic activity, growth phase, cell density, and antioxidant level might alter the potential effects of RF radiation. ***Alternative mechanisms will need to be considered and explored to explain consistently observed RF-dependent changes in controlled studies of biological exposure*** [emphasis added].”

Reference: IARC Monograph, Volume 102, for non-ionizing radiation (and radiofrequency electromagnetic fields), published April 2013, page 104.

The evidence is still mounting on the effects of RF exposures within our environment. Let us not be “reactionary.” Let us formally acknowledge the

“consistently observed” effects which are occurring at levels below the threshold necessary for thermal damage and move forward with a strategy that can be proactive and precautionary in nature to protect the public and the environment.

3. **NOI Paragraph 57, Comment on Device Duty Cycles.**

In the context of this NOI paragraph, the reference to a “source-based” time averaging provides consideration of devices with an inherent duty cycle. For exposure to wireless devices where the public cannot be excluded, the FCC should make clear that a 100% duty cycle must be utilized in calculations for power density. Taking the example for smart meters, advocates for use of such devices like to point out that the typical or average duty cycle for such devices is “low.” On the other hand, for a person with a concern about wireless smart meter emissions, the concern is over (involuntary) potential exposure for oneself and family, not the exposure for the average person. In fact, several smart meter measurement studies show that at least some smart meters involved with each study have duty cycles in the range of 3% to 5%, and even up to 10%, depending on the study. Since the average person does not possess the equipment necessary to measure the actual RF emissions from a wireless smart meter located on his or her property, at a minimum, it *must* be assumed that the duty cycle is the maximum value measured in the field. Furthermore, one of the smart grid industry’s most publicized reports, “Health Impacts of Radiofrequency from Smart Meters,” Final Report, dated April 2011, published by the California Council on Science and Technology (CCST), states that “The PG&E commissioned report by Richard Tell Associates is based only on [a] duty cycle of transmitting data once every four hours which results in this very low estimated peak power. ... To truly be a smart grid, the data will be transmitted at a much more frequent rate than this. In this report we look at the worst – case scenario, a meter that is stuck in the “on” position, constantly

relaying, at a 100% duty cycle [emphasis added]. ... Each smart meter is part of a broader 'mesh' network and may act as a relay between other smart meters and utility access points. The transmitter at each smart meter will be idle some of the time, with the percent of time idle (not transmitting) depending on the amount and schedule of data transmissions made from each meter, the relaying of data from other meters that an individual meter does, and the networking protocol (algorithm) that manages control and use of the communications paths in the mesh network. Theoretically the transmit time could increase substantially beyond today's actual operation level if new applications and functionality are added to the meter's communication module in the future."

4. **NOI Paragraph 58, Comment on Pulsed Fields versus Time-Averaged Fields.**

Although there is a basis for using time-averaged fields for evaluating thermal RF effects, limits based upon time-averaged fields have no relevance for adverse health impacts caused by non-thermal exposure mechanisms. Consequently, for instances where new biologically based exposure limits are developed or a precautionary approach is applied to limit RF exposures, action levels need to be based upon peak power levels. Such an approach would acknowledge that many new wireless devices create pulsed RF fields and that such fields may be linked to biologically disruptive effects.

5. **NOI Paragraphs 66, 67, 68, 69, & 70, Comments on Taking a Precautionary Approach.**

As stated above and until appropriate biologically based exposure limits can be developed, a "precautionary approach" should be utilized in order to reduce needless or unnecessary exposure to RF radiation. With such a practical approach, the current FCC exposure guidelines would represent a baseline with implementation of a number of measures intended at least to slow the

exponential growth of RF exposure to our population. Such measures need not include numerical action levels and could easily be implemented in a way that would provide a proper balance of protecting the public from unnecessary exposure without imposing an undue burden on the telecommunications industry.

The Precautionary Approach – Introduction

The "precautionary approach" represents the concept that when there is evidence of possible adverse health effects, precautionary measures should be taken, even when some cause and effect relationships are not fully understood or established. Precautionary measures can be adopted which complement and do not undermine science-based guidelines. In evaluating risk, one must acknowledge that the nature of risk can lead to different perceptions of risk and whether a person is willing to accept a particular risk or reject it. Although different people perceive risks differently, when deciding to apply a precautionary approach for a particular situation, it is necessary to accept that for an action to be warranted that there should be some "credible threat of harm." A "speculative fear of future harm" would not constitute a valid use of a precautionary approach to avoid risk. Finally, precautionary actions should be chosen that are proportional to the seriousness of the potential harm. The description for a precautionary approach described above is adapted from "The Precautionary Principle," World Commission on the Ethics of Scientific Knowledge and Technology (COMEST), March 2005. Specifically, the approach involves analyzing a situation to evaluate whether human activities may lead to **unacceptable harm** that is scientifically **plausible** but uncertain, and if so, then actions should be taken to avoid or diminish that harm.

The narrative that follows is somewhat abbreviated for purposes of these FCC submitted comments, but it is provided to conceptually demonstrate how easily that a precautionary approach can be determined to be warranted for RF emissions.

Concept of Unacceptable Harm

“Unacceptable harm” refers to harm to humans or the environment that is: (1) threatening to human life or health, or (2) serious and effectively irreversible, or (3) inequitable to present or future generations. Due to the International Agency for Research on Cancer (IARC) declaration which classifies RF radiation as a potential carcinogen and due to other evidence to be presented in subsequent paragraphs, it is plausible that RF radiation emissions from wireless devices may threaten human health. Some medical professionals claim that medical conditions are caused or aggravated by exposure to RF radiation, based on application of available science and clinical judgment. Additionally, numerous research studies show evidence of negative effects on human and animal physiology due to RF exposure at levels below FCC exposure guidelines.

Concept of Plausibility (Credible, Conceivable, Believable)

To support the basic claim of “plausibility” of harm for RF emissions, the following evidence is offered:

- 1) From May 24-31, 2011, the World Health Organization’s International Agency for Research on Cancer (IARC), a Working Group of 31 scientists from 14 countries, met in Lyon, France “to assess the potential carcinogenic hazards from exposure to radiofrequency electromagnetic fields.” The conclusion of the IARC Working Group was to classify “radiofrequency electromagnetic fields as possibly carcinogenic to humans (Group 2B) ... A positive association has been observed between exposure to the agent and cancer for which a causal interpretation is considered by the Working Group to be credible,...” “Dr Jonathan Samet (University of Southern California, USA), overall Chairman of the Working Group, indicated that ‘the evidence, while still accumulating, is strong

enough to support a conclusion and the 2B classification.”

Reference: World Health Organization Press Release, N-208, May 31, 2011.

- 2) The Federal Communications Commission (FCC) has acknowledged that “there is no federally developed national standard for safe levels [emphasis added] of exposure to radiofrequency (RF) energy...”

Reference: “Wireless Devices and Health Concerns,” FCC Consumer Facts pamphlet, available at:

<http://transition.fcc.gov/cgb/consumerfacts/mobilephone.pdf>.

- 3) On the US EPA website, radiofrequency radiation is listed as a “Potential Carcinogens, Link Suspected but Unconfirmed.” The EPA website further states that: “Exposure to radio frequency (RF) radiation has climbed rapidly with the advent of cell phones and other wireless technologies. Studies of the link between exposure to RF and to electric and magnetic frequency (EMF) radiation have found RF and EMF to be ‘potential carcinogens,’ but the data linking RF and EMF to cancer is not conclusive. World wide, health physicists (scientists who study the biological effects of radiation) continue to study the issue.”

- 4) The Parliamentary Assembly of the Council of Europe has stated that, “Governments should reconsider the scientific basis for the present electromagnetic fields exposure standards set by the International Commission on Non-Ionizing Radiation Protection, which have serious limitations and apply as low as reasonably achievable (ALARA) principles. The adopted resolution underlines the fact that the precautionary principle should be applicable when scientific evaluation does not allow the risk to be determined with sufficient certainty.” Reference: Council of Europe Parliamentary Assembly press release of May 27, 2011.

- 5) As explained by the Parliamentary Assembly of the Council of Europe in Resolution 1815 (2011), entitled, “The Potential Danger of Electromagnetic Fields and Their Effect on the Environment,”: “Given the context of the growing exposure of the population, in particular that of the vulnerable groups such as young people and children, there could be extremely high human and economic costs if early warnings are neglected.”
- 6) The United States Access Board, an independent Federal agency devoted to accessibility for people with disabilities, has stated, “The Board recognizes that multiple chemical sensitivities and electromagnetic sensitivities may be considered disabilities under the ADA if they so severely impair the neurological, respiratory or other functions of an individual that it substantially limits one or more of the individual's major life activities.” Reference: Federal Register, Vol. 67, No. 170, Tuesday, September 3, 2002, page 56353, “Architectural and Transportation Barriers Compliance Board.”
- 7) The United States Access Board sponsored the IEQ Indoor Environmental Quality Project, and the final project report includes the following statement, “For people who are electromagnetically sensitive, the presence of cell phones and towers, portable telephones, computers, fluorescent lighting, unshielded transformers and wiring, battery re-chargers, wireless devices, security and scanning equipment, microwave ovens, electric ranges and numerous other electrical appliances can make a building inaccessible.” Reference: “IEQ Indoor Environmental Quality,” NIBS IEQ Final Report, 7/14/05. Note: “NIBS” is an acronym for National Institute of Building Sciences.
- 8) The American Academy of Pediatrics, in a letter to Congressman Dennis Kucinich, dated December 12, 2012, states: “Children are

disproportionately affected by environmental exposures, including cell phone radiation. The differences in bone density and the amount of fluid in a child's brain compared to an adult's brain could allow children to absorb greater quantities of RF energy deeper into their brains than adults. It is essential that any new standards for cell phones or other wireless devices be based on protecting the youngest and most vulnerable populations to ensure they are safeguarded through their lifetimes."

- 9) Many well educated individuals and credible organizations claim that adverse effects from RF radiation occur at levels much lower than current FCC exposure guidelines. While FCC exposure guidelines typically range from 600 to 1,000 $\mu\text{Watt}/\text{cm}^2$, it is claimed by some organizations that adverse effects can occur at levels of 0.1 $\mu\text{Watt}/\text{cm}^2$ or lower. One such organization is "The BioInitiative Working Group 2012," mentioned earlier which has an exhaustive compilation of scientific study information and recommendations regarding exposure to RF radiation. Listed below are selected statements from the *BioInitiative 2012 Report*:

- "Bioeffects are clearly established and occur at very low levels of exposure to electromagnetic fields and radiofrequency radiation. Bioeffects can occur in the first few minutes at levels associated with cell and cordless phone use. Bioeffects can also occur from just minutes of exposure to mobile phone masts (cell towers), WI-FI, and wireless utility 'smart' meters that produce whole-body exposure."
- Many of these bioeffects can reasonably be expected to result in adverse health effects if the exposures are prolonged or chronic. This is because they interfere with normal body

processes (disrupt homeostasis), prevent the body from healing damaged DNA, produce immune system imbalances, metabolic disruption and lower resistance to disease across multiple pathways. Essential body processes can eventually be disabled by incessant external stresses (from system-wide electrophysiological interference) and lead to pervasive impairment of metabolic and reproductive functions.”

- “New, biologically-based public exposure standards are critically needed now and should key to scientific benchmarks for harm, plus a safety margin below that level. The standard of evidence for judging the scientific evidence should be based on good public health principles rather than demanding scientific certainty before actions are taken.”

- 10) Regarding Russian and Chinese exposure guidelines, they are considered science-based, as are the exposure guidelines for the United States. Russian and Chinese guidelines, however, acknowledge that chronic, non-thermal RF exposure effects do occur based upon biological experiments with animals and case studies with individuals. Scientists observe a range of effects, such as changes in electroencephalogram (EEG) readings, induction of autoimmune responses (formation of antibodies to brain tissues), stress-reactions, as well as adverse effects for blood serum results. It cannot be claimed with certainty that all observed effects are pathological and/or irreversible, but in any case, it is concluded that such effects influence the physical and mental well being of affected individuals and therefore constitute a health hazard. In the United States, exposure standards are primarily based upon engineering calculations assessing short-term thermal effects of RF energy on human tissue. For chronic exposures, non-thermal considerations

were not included for US and most western European exposure guidelines due to a claimed “paucity of reliable data on chronic exposures.” Russian scientists argue that RF exposure guidelines based upon chronic exposure levels and interactions are more representative of the real world experience of the population and thus are more appropriate than exposure to acute situations at thermal exposure levels which are rarely encountered. Furthermore, Russian scientists assert that the establishment of threshold levels based solely on thermal considerations makes the assumption that an organism will compensate or adapt to non-thermal RF exposure effects and that there is no basis for this assumption. Information to validate the evidence presented in this section is considered common knowledge, but two sources to substantiate the claims are available at the following links:

http://archive.radiationresearch.org/conference/downloads/021235_grigoriev.pdf;

and

http://www.who.int/peh-emf/meetings/day2Varna_Foster.pdf.

Based upon the type of information presented above and the fact that FCC guidelines do not address possible adverse effects of non-thermal RF radiation effects, there are sufficient grounds for consideration that unacceptable harm be considered as scientifically plausible if not probable for RF emissions from wireless devices, i.e., that there is a “credible threat of harm” as perceived by a prudent person.

Basic Precautionary Actions

Showing that the basic threshold for plausible and unacceptable harm has been met, it is thus appropriate to consider a precautionary approach. The next step is choosing the appropriate form of precautionary action. Based upon what was

presented earlier, precautionary measures should be chosen that are proportional to the seriousness of the potential harm. It is instructive to review guidance provided by the US EPA regarding use of wireless technology. At its website at <http://www.epa.gov/radtown/wireless-tech.html>, the following guidance is provided:

“What you can do to protect yourself: Although there is not sufficient evidence to conclude that there is a definite risk associated with long-term cell phone use, people who are concerned can take simple steps to reduce exposure: **Limit use** – reducing the number/length of calls; **Use ‘hands-free’ devices** – Using ‘hands-free’ devices can help to keep mobile phones away from the head.”

In addition, at the US EPA website, the topic of exposure to radiofrequency (RF) radiation is discussed in a section on “Optional” exposure mechanisms, along with smoking and exposure to UV radiation which are other exposure mechanisms that may lead to cancer. The inference is that concerned members of the public who fear cancer through these exposure mechanisms should limit or avoid exposure to cigarette smoke and sunlight.

Refer to the link at: <http://www.epa.gov/radtown/basic.html>.

Recommended Approach to Reduce Future RF Exposures

Based upon the presented information, it can be surmised that exposure to RF radiation is already considered, at least to some extent, as an optional or voluntary exposure mechanism in our society. The recommended approach at this time for the FCC (as a precautionary measure) is relatively simple:

- 1) No immediate changes are recommended for limits involving cell tower transmissions since any such changes could significantly and negatively impact the telecommunications industry. Any such changes could await the development of more restrictive biologically based exposure

guidelines, a process that should include active participation of all affected stakeholders.

- 2) The FCC should fully “endorse” common sense precautionary measures to at least slow the exponential growth of exposure to wireless RF technology emissions in our society. Such measures would focus on educating the public on the voluntary nature of using personal wireless devices and how members of the public can use simple methods such as “time and distance” to reduce overall exposure. Specific approaches could include the following:

- Implement awareness campaigns on the potential risks of RF radiation, targeting children, teenagers, and young people who may at greatest risk for non-thermal effects;
- Evaluate current labeling practices for wireless devices and improve language and nature of warnings for possible health hazards;
- Particularly for schools and classrooms, indicate preference for wired Internet connections;
- As some organizations have already recommended, emphasize hands-free operation of cellular phones and texting when possible to reduce exposure to the head area;
- Emphasize the voluntary nature of wireless devices used in the home and stipulate that no utility, government, or other entity can require installation of a RF emitting device upon one’s property without one’s consent.

Specific Recommendations for Smart Meter and Smart Appliances

Inherent in the final approach mentioned above is that the use of wireless transmission devices in the home must be considered optional and voluntary.

Unfortunately, some local governments, public utility commissions, and utilities do not respect this fundamental consideration for members of the public when it comes to so-called wireless smart meters. They are forcibly installing RF transmitters on homeowners' properties without consent and then deferring all safety issues to the FCC. The FCC is effectively used as a scapegoat by other governmental and utility officials to be able to not fully justify their actions when it comes to exposing our entire population to a new source of environmental radiation that many people believe negatively affects their health and well-being.

Similar issues are emerging with the use of so-called smart appliances. These appliances include RF transmitters and it is not clear that all manufacturers are including an option for consumers to easily deactivate those transmitters for those individuals not desiring to be exposed to additional RF radiation in the home. Thus, it requested that the FCC perform the following:

- 1) The FCC should promptly revise/ issue equipment authorizations for wireless smart meters to clearly stipulate that installation of such devices on individual homes requires the property owner's consent, giving the homeowners the opportunity to use the precautionary approach in an effort to limit RF exposure. Such measures would be totally consistent with the implied concept of "voluntary use" of wireless technologies in the home.
- 2) The FCC should mandate that all smart appliances containing an RF transmitter for communication with wireless smart meters or wireless routers be provided with a clear mechanism for the consumer to ensure that any RF transmitters contained within the device are deactivated.

6. **NOI Paragraph 69, Comment on "Anxiety in the Population."**

The FCC makes a curious statement that "adoption of extra precautionary measures may have the unintended consequence of 'opposition to progress

and the refusal of innovation, ever greater bureaucracy,... [and] increased anxiety in the population.” What about the anxiety and possible physical harm that can be caused by not taking prudent measures to reduce exposure?

Actually at the point where the FCC refers to “anxiety in the population,” it was selectively quoting a French published article entitled, “Conclusions. The Precautionary Principle: Its Advantages and Risks.” That article (as the title indicates) discussed the “pros and cons” of implementing a precautionary principle. One of the statements not quoted by the FCC in that same article was that “the precautionary principle can have advantages, such as motivating decision-makers in the public or private sector to explain and quantify their reasoning, and to give objective information.” This would hopefully be the case for the forcible installation of wireless smart meter for every house in America. If consumer consent was required prior to installation of a smart meter, decision-makers would more likely either completely explain their reasoning or would find a better alternative metering system.

7. Why Wireless Smart Meters Should Not Be Mandatory

As was mentioned in the Introduction to these comments filed with the FCC, Mr. Weaver maintains a website dedicated to raising public awareness about the benefits, costs, and risks associated with smart grid systems as well as the potential hazards related to radiofrequency (RF) radiation emissions from all wireless devices, including smart meters. The attachment to these comments is adapted from an article published on his website that describes “Why Wireless Smart Meters Should Not Be Mandatory” and that no published studies conclude that smart meters are safe for the public. This article further supports the assertion made in these comments that the use of wireless devices in the home should be considered as voluntary.

Why Wireless Smart Meters Should Not Be Mandatory

by Kit T. Weaver

In defending the use of wireless smart meters, if someone states that there are no peer reviewed studies that would substantiate health concerns for wireless smart meters, then that person is making a non-conservative and misleading claim. The fact is that are no epidemiological studies that would indicate that wireless smart meters are safe.

Smart grid advocates frequently make a claim that: “While concerns have been raised about the potential impact of the RF generated by these smart meters, ***numerous studies have shown that smart meters using RF technologies pose no health risk.***” This statement exists, for example, at the Edison Electric Institute website at: <http://smartgrid.eei.org/Pages/FAQs.aspx>, as part of an answer to the question, “Does the radio frequency (RF) signal produced from smart meters cause any health effects?”

To some extent the smart meter safety claims rely on conclusions reached based upon selected studies performed for cell phone or cordless phone exposures and where statements are made such as:

“There currently is no ***conclusive*** [emphasis added] scientific evidence pointing to a non-thermal cause-and-effect between human exposure to RF emissions and negative health impacts.” [Reference: California Council for Science and Technology, Final Report, dated April 2011, entitled, “Health Impacts of Radio Frequency Exposure from Smart Meters,” page 13.]

The above statement purposely ignores the fact that substantial evidence confirms a non-thermal cause-and-effect between human exposure to RF emissions and negative health impacts. The reference to the term conclusive is generally understood to mean, “putting an end to debate or question especially by reason of

irrefutability.” The type of discussion and logic employed in the above statement essentially represents a straw man argument for this issue, which is based upon the inappropriate and irrational premise that “conclusive” and irrefutable evidence is needed prior to taking any action to protect the public. In biology and medicine, there is very little that is known conclusively or with near 100% certainty.

In medical science, not all results are consistent due to biological variability. We are all the product of thousands of genes that interact with each other and the environment in unpredictable ways. Each individual is unique. Not every smoker dies of cancer. Some people are allergic to eggs and most are not. One may be allergic to peanuts while another is not. We don’t all have the same side effects from taking prescription drugs, and we can’t all be expected to respond in the same way to electromagnetic insults. Just because everyone is not affected by RF radiation doesn’t mean that no one is affected.

In addition, with regard to smart meters, safety claims are also based upon industry documents demonstrating that emissions from individual smart meter devices comply with Federal Communications Commission (FCC) exposure guidelines, and then referring to such documentation as a “study.”

Dr. De-Kun Li* is a leading research scientist in reproductive and prenatal epidemiology. In December 2012, Dr. Li filed testimony before the Maine Public Utility Commission regarding the issues of wireless smart meter safety. Specifically, Dr. Li was asked about possible non-thermal radiation effects from RF emissions and whether science supports the conclusion that wireless smart meters are “safe.” The response was, “**No**.” Furthermore, Dr. Li indicated that, “***I am not aware of any studies that have shown that exposure to smart meters is safe for the human population.*** [emphasis added] Anyone who wants to install smart meters to every household needs to demonstrate that such massive installation is safe and will have no effect on the risk of cancer, childhood obesity and asthma, autoimmune diseases, etc.”

** Author Note: To review the entire testimony for Dr. Li, refer to the following link:
<http://skyvisionsolutions.files.wordpress.com/2013/07/exhibit-2-de-kun-li-web.pdf>.*

*In addition, in 2011, Dr. Li had previously commented on the draft CCST report referenced earlier in this report. In his comment letter, he made many relevant points, among them that "**Unknown does not mean safe.**" For a copy of Dr. Li's full comment letter, refer to the following link:
<http://skyvisionsolutions.files.wordpress.com/2013/06/liccst.pdf>.*

In fact, there have been no epidemiological studies performed to even attempt to demonstrate the safety of wireless smart grid technology in terms of widespread deployment within the human population. Because of this fact alone, informed citizens should be allowed to implement a precautionary approach with regard to wireless smart meter emissions in order to prudently avoid a new source of RF radiation in their homes. Furthermore, for some individuals, they are convinced that they are currently being harmed by the RF emissions from smart meters due to symptoms related to Electromagnetic Hypersensitivity (EHS).

Smart grid advocacy groups attempt to lump cell phones, cordless phones, and wireless smart meters together as devices we all "frequently encounter," not acknowledging that there is an element of choice involved with all non-smart meter devices in the home. For those people who oppose the installation of wireless smart meters, there is an element of principle involved. A person can eliminate or curtail the use of all other wireless devices in the home, but in most cases across the country, for the wireless smart meter, a person cannot. If there is an "opt-out" provision, a fee is usually involved in order to prudently avoid a newly added source of RF emissions for the home.

Again quoting additional testimony for Dr. De-Kun Li mentioned above, “cell phone use is usually for a short duration. ... Use of cell phones is a voluntary exposure. One can choose not to use a cell phone. Vulnerable populations like infants and young children are not exposed to cell phone RF EMF in most cases. However, every resident, including infants, pregnant women and the fetus, in a household will be exposed to RF EMF from smart meters if installed nearby. Given that installation of smart meters is mandatory in most places, RF EMF exposure from smart meters is an “involuntary” exposure. Based upon the principle of risk assessment, involuntary exposures require more stringent safety standards.”

Based upon the facts and the collective evidence, it is correct to make the following conclusions regarding wireless smart meter RF emissions:

- RF radiation emitted from wireless smart meters has been determined by the IARC to be *possibly carcinogenic to humans*.

[Note: The IARC Monograph Volume 102, for non-ionizing radiation (and radiofrequency electromagnetic fields) makes quite clear that applicability for the IARC declaration for a Group 2B carcinogen does indeed apply to all RF emissions in the range of 30 kHz to 300 GHz from all sorts of wireless devices, including wireless smart meters. Some smart grid advocates have tried to interpret the original IARC declaration and the associated press release in May 2011 for applicability to mobile phone emissions only. In fact, smart meters are specifically mentioned in the IARC Monograph as a “Domestic Source” of RF emissions.]

Also note that leading epidemiologists in a recent published article have concluded that radiofrequency (RF) radiation is a probable human carcinogen. This article reviews new studies published since the IARC review in 2011 and concludes that RF radiation should be re-classified as a probable human carcinogen. Impressive reports that have studied those individuals who began using cell phones before age 20 find a 4 to 8 fold increase in brain cancer as well as increases in leukemia. At one point in the published article it is states that “Current standards for exposure to radiofrequency fields were set more than fifteen years ago resting on the belief that levels of microwave radiation from mobile phones cannot induce any measureable change in temperature or other biological effect. Recent analyses show that this assumption is no longer tenable.” [emphasis added]. For more information on the article published in the April 2013 issue of *Pathophysiology*, refer to the following link:

<http://download.journals.elsevierhealth.com/pdfs/journals/0928-4680/PIIS0928468013000035.pdf>.

- The current IARC determination was made primarily based upon epidemiological studies with people exposed to RF emissions from cell phones and cordless phones.
- No epidemiological studies have been performed with people exposed to the emissions from wireless smart meters.
- The intensities of exposure received from a cell phone and a wireless smart meter are not nearly as different as claimed by smart grid advocates. In fact, the exposure is quite similar for equivalent spatial configurations. Although the greater distance from a smart meter can be considered as a differential factor under typical exposure scenarios, conversely, so can the chronic nature of smart meter exposure as opposed to most people using their cell phones for no more 20 minutes per day for voice communications. It is also possible that different signal characteristics of RF emissions from different devices may produce different biological effects.
- Based upon limited evidence that RF fields are carcinogenic, there are sufficient grounds to conclude that it is scientifically plausible that RF radiation from smart meters may threaten human health.
- It is also important to acknowledge that the IARC declaration only addresses the possible carcinogenic nature of RF radiation emissions. It does not address possible adverse health effects such as Electromagnetic Hypersensitivity (EHS) or other medical conditions potentially caused or aggravated by non-thermal RF exposure mechanisms.

Numerous studies can be listed which tend to confirm that EHS is a valid medical syndrome. See, for example, a recent article published in *Electromagnetic Biology and Medicine*, June 2013, Vol. 32, No. 2, pages 253-266. The article is entitled, "Replication of Heart Rate Variability Provocation Study with 2.4-GHz Cordless Phone Confirms Original Findings." A conclusion of the article is that radiation from a 2.4-GHz cordless phone affects the Autonomic Nervous System and may put some individuals with preexisting heart conditions at risk when exposed to electromagnetic frequencies to which they are sensitive. For more information on this article, refer to the following link: <http://thetruthaboutsmartgrids.org/2013/08/10/replication-of-heart-rate-provocation-study/>.

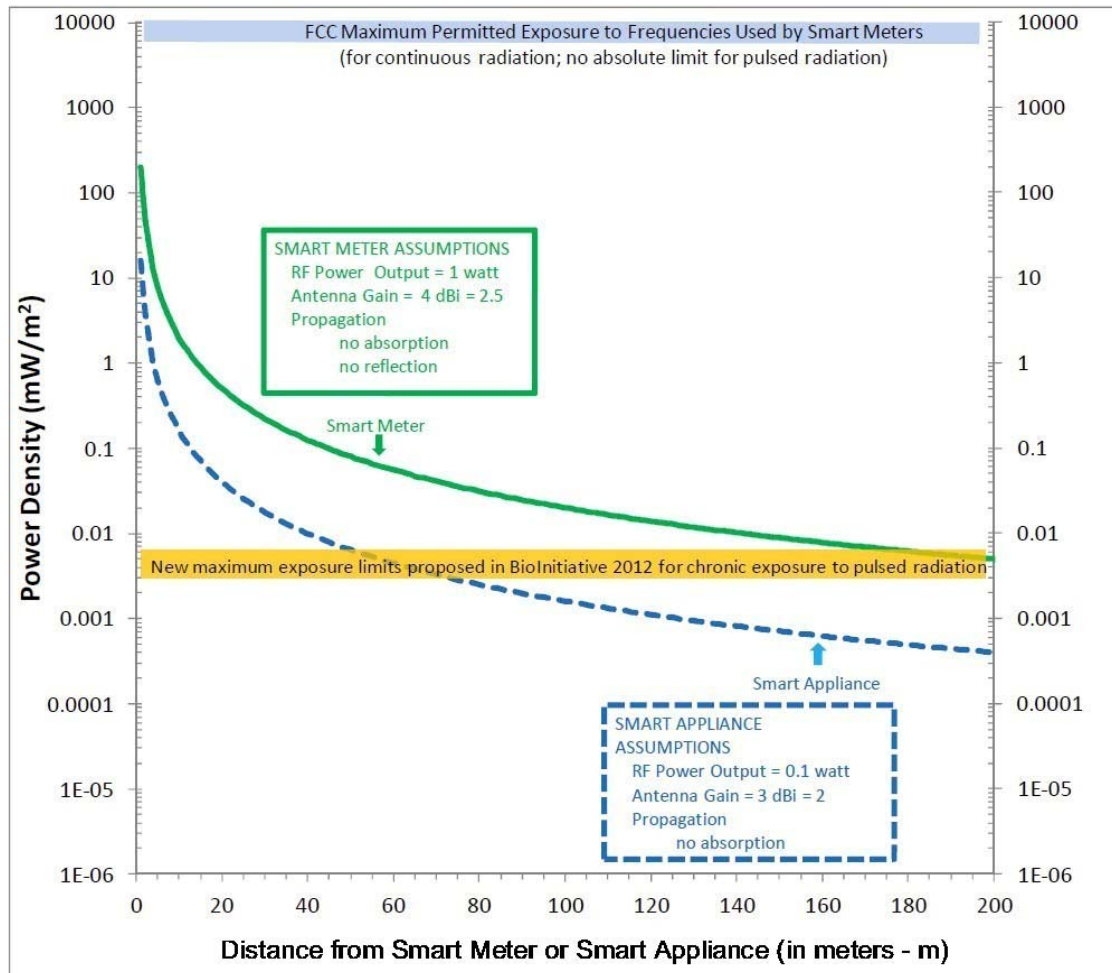
- The true issue at hand is whether a precautionary approach is warranted, the most basic of which is voluntary and prudent avoidance of wireless RF emissions.
- It is logical and reasonable that prudent avoidance of wireless smart meter emissions in the home be considered warranted since such action is currently allowed for all other devices in the home which emit RF radiation.

In addition to the information presented so far in this document, a recent report has been prepared by Ronald M. Powell (Ph.D., Harvard University, 1975), entitled, “Biological Effects from RF Radiation at Low-Intensity Exposure, Based on the BioInitiative 2012 Report, and the Implications for Smart Meters and Smart Appliances,” dated June 11, 2013. Even though no epidemiological studies have been performed with people exposed to the emissions from wireless smart meters, this new report provides perspective on how adverse effects documented within the context of the *BioInitiative Report 2012* would support the supposition that adverse biological effects should be expected based upon the RF radiation levels produced from smart meters and smart appliances.

Brief commentary on the report prepared by Dr. Powell:

1. The report is somewhat unique in that it discusses not only smart meter RF emissions but also addresses emissions associated with so-called “smart appliances” that many people are beginning to purchase for their homes;
2. The report shows that RF radiation emitted from smart meters and smart appliances can affect human health at distances far in excess than will be acknowledged by smart grid advocates. Refer to the figure below (extracted from the report);
3. In simple terms, chronic exposure to pulsed RF radiation fields at levels above the horizontal yellow band in the figure is a cause for concern.

Figure 1: Smart Meter and Smart Appliance RF Power Densities versus Distance



For the full report, refer to the following link:

http://skyvisionsolutions.files.wordpress.com/2013/06/powell-report-bioinitiative-report-2012-applied-to-smart-meters-and-smart-appliances_june_11_2013.pdf.

Because of the foregoing information, it is reasonable and appropriate that individuals be able to opt-out of wireless smart meter installations without charge, fee, or penalty.

Organizations-Radiation Sickness; StopSmartMeters, Comment; Feb. 4, 2013

FCC 12-152

**Before the
Federal Communications Commission
Washington, D.C. 20554**

In the Matter of	)	
	)	
Notice of Proposed Rulemaking	)	
18 FCC Rcd 13187, 13188 ¶1 (2003)	)	ET Docket No. 03-137
	)	
And	)	
	)	
Service Rules for the Advanced Wireless Services	)	WT Docket No. 12-357
H Block---Implementing Section 6401 of the	)	
Middle Class Tax Relief and Job Creation Act of	)	
2012 Related to the 1915-1920 MHz and	)	
1995-2000 MHz Bands ¶53 footnote 95	)	

To: Office of the Secretary
Federal Communications Commission
Washington, DC 20554

Comment Filed by: Joshua Hart
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February 4, 2013

AFFIDAVIT OF Joshua Hart

State of California

Santa Cruz County]

I, Joshua Hart attest that my statements are true to the best of my knowledge.

Comment round for ET Docket No. 03-137 and WT Docket No. 12-357.

1. My name is Joshua Hart My address is PO Box 30 Davenport, CA 95017.
2. I am Director of Stop Smart Meters! a California based organization fighting the forced deployment of “smart” utility meters that harm health, violate civil liberties and endanger public safety.
3. I have personally interviewed, read first person accounts and listened to first and second hand accounts of smart meter victims suffering from a wide range of adverse health effects from mild to severely debilitating. I am familiar with well over one thousand such accounts. Many of these victims began suffering symptoms before they knew a smart meter had been installed either on their home or in their neighborhood. Many of these people have become so sensitized they have been forced from their homes [because of proximity to area meters] and have been forced from their jobs because of RF in the workplace. For many people who have become sensitized to RF, they have remained so even with removal of their meter. While we may not have sufficient understanding of the effects of RF and mechanisms of interaction with biological systems to establish 100% certain causation, it’s astoundingly clear in repeatable real life situations that smart meters can cause adverse biological effects and that sensitivity to RF can result from instant exposure and or exposure over time.
4. FCC regulations dictate that for many electric smart meter models (eg. OWS NIC 507), no person may get within 20 centimeters of the antenna, meters must not be co-located, and the meters must be installed by a professional. During the course of my work to investigate the harm caused by smart meters, I have come across thousands of people whose health has been negatively affected by smart meters installed and

operating in violation of these requirements. It is my professional opinion that current FCC guidelines for RF exposure are inadequate to protect human and environmental health and not based on biology but rather physics, an antiquated approach to scientific policy making.

5. I have personally been “sensitized” to RF radiation by exposure to a bank of smart meters. Since exposure I now develop symptoms such as headache and nausea when exposed to cell phones, towers, wi-fi and smart meters. That FCC limits on RF radiation could allow such powerful radiation as to create sensitivity where there was none is direct evidence that the guidelines are outdated and irrelevant to the goal of protecting human health if that is indeed the goal of this proceeding. Lower the limits!
6. Dozens of scientific studies have shown negative impacts of EMR on human health, even at low levels of exposure. The most commonly accepted guidelines are the Building Biology recommendations that list 1,000 microwatts/m² as the threshold for “extreme concern” (http://www.baubiologie.de/downloads/english/richtwerte_2008_englisch.pdf). On May 31, 2011, the World Health Organization's International Agency for Research on Cancer (IARC) classified radiofrequency fields as “possibly carcinogenic to humans.” The FCC does not use biologically determined guidelines that affect health, but rather uses a standard that measures thermal heating of biological tissue. The premise that there are no adverse impacts of EMR on the human body until it is cooked is completely ridiculous.
7. I urge the FCC to adopt new RF safety guidelines that take into account published research on the biological effects brought on by the ability of RF signals to communicate with living tissue, and more specifically, to consider the Building Biology guidelines for human health.

Respectfully submitted by

Name Joshua Hart

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February 6, 2013

Cell Phones; Research Abstracts of Over 700 Studies
Showing Health Effects from Cell Phone Radio Frequency
Radiation; Prof. Henri Lai
(Tab 142 Part 1)

Studies that show **Cell Phone** Health Effects**Table of Contents****Over 700 Studies Showing Health Effects from Cell Phone Radio
Frequency Radiation**

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Cancer

Hardell L, Carlberg M, Hansson Mild K. Pooled analysis of case-control studies on malignant brain tumours and the use of mobile and cordless phones including living and deceased subjects. *Int J Oncol*. 38(5):1465-1474, 2011.

We studied the association between use of mobile and cordless phones and malignant brain tumours. Pooled analysis was performed of two case-control studies on patients with malignant brain tumours diagnosed during 1997-2003 and matched controls alive at the time of study inclusion and one case-control study on deceased patients and controls diagnosed during the same time period. Cases and controls or relatives to deceased subjects were interviewed using a structured questionnaire. Replies were obtained for 1,251 (85%) cases and 2,438 (84%) controls. The risk increased with latency period and cumulative use in hours for both mobile and cordless phones. Highest risk was found for the most common type of glioma, astrocytoma, yielding in the >10 year latency group for mobile phone use odds ratio (OR) = 2.7, 95% confidence interval (CI) = 1.9-3.7 and cordless phone use OR = 1.8, 95% CI = 1.2-2.9. In a separate analysis, these phone types were independent risk factors for glioma. The risk for astrocytoma was highest in the group with first use of a wireless phone before the age of 20; mobile phone use OR = 4.9, 95% CI = 2.2-11, cordless phone use OR = 3.9, 95% CI = 1.7-8.7. In conclusion, an increased risk was found for glioma and use of mobile or cordless phone. The risk increased with latency time and cumulative use in hours and was highest in subjects with first use before the age of 20.

Lonn S, Ahlbom A, Hall P, Feychting M. Mobile phone use and the risk of acoustic neuroma. *Epidemiology*. 15(6):653-659, 2004.

BACKGROUND:: Radiofrequency exposure from mobile phones is concentrated to the tissue closest to the handset, which includes the auditory nerve. If this type of exposure increases tumor risk, acoustic neuroma would be a potential concern. METHODS:: In this population-based case-control study we identified all cases age 20 to 69 years diagnosed with acoustic neuroma during 1999 to 2002 in certain parts of Sweden. Controls were randomly selected from the study base, stratified on age, sex, and residential area. Detailed information about mobile phone use and other environmental exposures was collected from 148 (93%) cases and 604 (72%) controls. RESULTS:: The overall odds ratio for acoustic neuroma associated with regular mobile phone use was 1.0 (95% confidence interval = 0.6-1.5). Ten years after the start of mobile phone use the estimates relative risk increased to 1.9 (0.9-4.1); when restricting to tumors on the same side of the head as the phone was normally used, the relative risk was 3.9 (1.6-9.5). CONCLUSIONS:: Our findings do not indicate an increased risk of acoustic neuroma related to short-term mobile phone use after a short latency period. However, our data suggest an increased risk of acoustic neuroma associated with mobile phone use of at least 10 years' duration.

Levis AG, Minicuci N, Ricci P, Gennaro V, Garbisa S. Mobile phones and head tumours.

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The discrepancies in cause-effect relationships in the epidemiological studies - how do they arise? *Environ Health.* 10:59, 2011.

BACKGROUND: Whether or not there is a relationship between use of mobile phones (analogue and digital cellars, and cordless) and head tumour risk (brain tumours, acoustic neuromas, and salivary gland tumours) is still a matter of debate; progress requires a critical analysis of the methodological elements necessary for an impartial evaluation of contradictory studies. **METHODS:** A close examination of the protocols and results from all case-control and cohort studies, pooled- and meta-analyses on head tumour risk for mobile phone users was carried out, and for each study the elements necessary for evaluating its reliability were identified. In addition, new meta-analyses of the literature data were undertaken. These were limited to subjects with mobile phone latency time compatible with the progression of the examined tumours, and with analysis of the laterality of head tumour localisation corresponding to the habitual laterality of mobile phone use. **RESULTS:** Blind protocols, free from errors, bias, and financial conditioning factors, give positive results that reveal a cause-effect relationship between long-term mobile phone use or latency and statistically significant increase of ipsilateral head tumour risk, with biological plausibility. Non-blind protocols, which instead are affected by errors, bias, and financial conditioning factors, give negative results with systematic underestimate of such risk. However, also in these studies a statistically significant increase in risk of ipsilateral head tumours is quite common after more than 10 years of mobile phone use or latency. The meta-analyses, our included, examining only data on ipsilateral tumours in subjects using mobile phones since or for at least 10 years, show large and statistically significant increases in risk of ipsilateral brain gliomas and acoustic neuromas. **CONCLUSIONS:** Our analysis of the literature studies and of the results from meta-analyses of the significant data alone shows an almost doubling of the risk of head tumours induced by long-term mobile phone use or latency.

Hardell L, Carlberg M, Hansson Mild K. Use of mobile phones and cordless phones is associated with increased risk for glioma and acoustic neuroma. Pathophysiology. 2012 Dec 20. pii: S0928-4680(12)00110-1. doi: 10.1016/j.pathophys.2012.11.001. [Epub ahead of print]

The International Agency for Research on Cancer (IARC) at WHO evaluation of the carcinogenic effect of RF-EMF on humans took place during a 24-31 May 2011 meeting at Lyon in France. The Working Group consisted of 30 scientists and categorised the radiofrequency electromagnetic fields from mobile phones, and from other devices that emit similar non-ionising electromagnetic fields (RF-EMF), as Group 2B, i.e., a 'possible', human carcinogen. The decision on mobile phones was based mainly on the Hardell group of studies from Sweden and the IARC Interphone study. We give an overview of current epidemiological evidence for an increased risk for brain tumours including a meta-analysis of the Hardell group and Interphone results for mobile phone use. Results for cordless phones are lacking in Interphone. The meta-analysis gave for glioma in the most exposed part of the brain, the temporal lobe, odds ratio (OR)=1.71, 95% confidence interval (CI)=1.04-2.81 in the ≥10 years (>10 years in the Hardell group)

Studies that show **Cell Phone** Health Effects

latency group. Ipsilateral mobile phone use ≥ 1640 h in total gave OR=2.29, 95% CI=1.56-3.37. The results for meningioma were OR=1.25, 95% CI=0.31-4.98 and OR=1.35, 95% CI=0.81-2.23, respectively. Regarding acoustic neuroma ipsilateral mobile phone use in the latency group ≥ 10 years gave OR=1.81, 95% CI=0.73-4.45. For ipsilateral cumulative use ≥ 1640 h OR=2.55, 95% CI=1.50-4.40 was obtained. Also use of cordless phones increased the risk for glioma and acoustic neuroma in the Hardell group studies. Survival of patients with glioma was analysed in the Hardell group studies yielding in the >10 years latency period hazard ratio (HR)=1.2, 95% CI=1.002-1.5 for use of wireless phones. This increased HR was based on results for astrocytoma WHO grade IV (glioblastoma multiforme). Decreased HR was found for low-grade astrocytoma, WHO grades I-II, which might be caused by RF-EMF exposure leading to tumour-associated symptoms and earlier detection and surgery with better prognosis. Some studies show increasing incidence of brain tumours whereas other studies do not. It is concluded that one should be careful using incidence data to dismiss results in analytical epidemiology. The IARC carcinogenic classification does not seem to have had any significant impact on governments' perceptions of their responsibilities to protect public health from this widespread source of radiation.

Hardell L, Carlberg M, Söderqvist F, Hansson Mild K. Meta-analysis of long-term mobile phone use and the association with brain tumours. *Int J Oncol.* 32(5):1097-1103, 2008.

We evaluated long-term use of mobile phones and the risk for brain tumours in case-control studies published so far on this issue. We identified ten studies on glioma and meta-analysis yielded OR = 0.9, 95% CI = 0.8-1.1. Latency period of ≥ 10 -years gave OR = 1.2, 95% CI = 0.8-1.9 based on six studies, for ipsilateral use (same side as tumour) OR = 2.0, 95% CI = 1.2-3.4 (four studies), but contralateral use did not increase the risk significantly, OR = 1.1, 95% CI = 0.6-2.0. Meta-analysis of nine studies on acoustic neuroma gave OR = 0.9, 95% CI = 0.7-1.1 increasing to OR = 1.3, 95% CI = 0.6-2.8 using ≥ 10 -years latency period (four studies). Ipsilateral use gave OR = 2.4, 95% CI = 1.1-5.3 and contra-lateral OR = 1.2, 95% CI = 0.7-2.2 in the ≥ 10 -years latency period group (three studies). Seven studies gave results for meningioma yielding overall OR = 0.8, 95% CI = 0.7-0.99. Using ≥ 10 -years latency period OR = 1.3, 95% CI = 0.9-1.8 was calculated (four studies) increasing to OR = 1.7, 95% CI = 0.99-3.1 for ipsilateral use and OR = 1.0, 95% CI = 0.3-3.1 for contralateral use (two studies). We conclude that this meta-analysis gave a consistent pattern of an association between mobile phone use and ipsilateral glioma and acoustic neuroma using ≥ 10 -years latency period.

Hardell LO, Carlberg M, Soderqvist F, Hansson Mild K, Morgan LL Long-term use of cellular phones and brain tumours - increased risk associated with use for > 10 years. *Occup Environ Med.* 64(9):626-632, 2007.

AIM: To evaluate brain tumour risk among long-term users of cellular telephones.
METHODS: One cohort study and 13 case-control studies were identified on this topic. Data were scrutinized for use of mobile phone for > 10 years and ipsilateral exposure if presented. RESULTS: The cohort study was of limit value due to methodological

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shortcomings in the study. Of the 13 case-control studies, 9 gave results for > 10 years use or latency period. Most of these results were based on low numbers. Clearly an association with acoustic neuroma was found in four studies with two- to three-fold increased risk in the group with at least 10 years use of a mobile phone. No risk was found in one study, but the tumour size was significantly larger among users. Five studies gave results for malignant brain tumours in that latency group. All gave increased OR especially for ipsilateral exposure. Highest OR = 5.4, 95 % CI = 3.0-9.6 was calculated for high-grade glioma and ipsilateral exposure in one study. CONCLUSIONS: Results from present studies on use of mobile phones for > 10 years give a consistent pattern of an increased risk for acoustic neuroma and glioma, most pronounced for high-grade glioma. The risk is highest for ipsilateral exposure.

Hardell L, Carlberg M, Cell and cordless phone risk for glioma - Analysis of pooled case-control studies in Sweden, 1997-2003 and 2007-2009, Pathophysiology (2014), Available online 29 October 2014. <http://dx.doi.org/10.1016/j.pathophys.2014.10.001>

We made a pooled analysis of 2 case-control studies on malignant brain tumours with patients diagnosed during 1997-2003 and 2007-2009. They were aged 20-80 years and 18-75 years, respectively, at the time of diagnosis. Only cases with histopathological verification of the tumour were included. Population-based controls, matched on age and gender, were used. Exposures were assessed by questionnaire. The whole reference group was used in the unconditional regression analysis adjusted for gender, age, year of diagnosis and socio-economic index.

In total 1,498 (89%) cases and 3,530 (87%) controls participated. Mobile phone use increased the risk of glioma, OR = 1.3, 95% CI = 1.1-1.6 overall, increasing to OR = 3.0, 95% CI = 1.7-5.2 in the > 25 year latency group. Use of cordless phones increased the risk to OR = 1.4, 95% CI = 1.1-1.7, with highest risk in the >15-20 year latency group yielding OR = 1.7, 95% CI = 1.1-2.5. The OR increased statistically significant both per 100 h of cumulative use, and per year of latency for mobile and cordless phone use. Highest ORs overall were found for ipsilateral mobile or cordless phone use, OR = 1.8, 95% CI = 1.4-2.2 and OR = 1.7, 95% CI = 1.3-2.1, respectively. The highest risk was found for glioma in the temporal lobe. First use of mobile or cordless phone before the age of 20 gave higher OR for glioma than in later age groups

Hardell L, Carlberg M. Use of Mobile and Cordless Phones and Survival of Patients with Glioma. Neuroepidemiology. 40(2):101-108, 2012.

Background: We analysed the survival of patients after glioma diagnosis in relation to the use of wireless phones. Methods: All cases diagnosed between 1997 and 2003 with a malignant brain tumour (n = 1,251) in our case-control studies were included and followed from the date of diagnosis to the date of death or until May 30, 2012. Results: For glioma, the use of wireless phones (mobile and cordless phones) gave a hazard ratio (HR) = 1.1 (95% confidence interval, CI = 0.9-1.2), with >10-year latency HR = 1.2 (95% CI = 1.002-1.5, p trend = 0.02). For astrocytoma grade I-II (low-grade), the results were, HR = 0.5 (95% CI = 0.3-0.9) and for astrocytoma grade IV (glioblastoma), HR = 1.1 (95% CI =

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0.95-1.4), with >10 year latency HR = 1.3 (95% CI = 1.03-1.7). In the highest tertile (>426 h) of cumulative use, HR = 1.2 (95% CI = 0.95-1.5) was found for glioblastoma. The results were similar for mobile and cordless phones. Conclusions: Decreased survival of glioma cases with long-term and high cumulative use of wireless phones was found. A survival disadvantage for astrocytoma grade IV, but a survival benefit for astrocytoma grade I-II was observed which could be due to exposure-related tumour symptoms leading to earlier diagnosis and surgery in that patient group.

Carlberg M, Hardell L. Decreased Survival of Glioma Patients with Astrocytoma Grade IV (Glioblastoma Multiforme) Associated with Long-Term Use of Mobile and Cordless Phones. *Int J Environ Res Public Health*. 11(10):10790-10805, 2014.

On 31 May 2011 the WHO International Agency for Research on Cancer (IARC) categorised radiofrequency electromagnetic fields (RF-EMFs) from mobile phones, and from other devices that emit similar non-ionising electromagnetic fields, as a Group 2B, i.e., a "possible", human carcinogen. A causal association would be strengthened if it could be shown that the use of wireless phones has an impact on the survival of glioma patients. We analysed survival of 1678 glioma patients in our 1997-2003 and 2007-2009 case-control studies. Use of wireless phones in the >20 years latency group (time since first use) yielded an increased hazard ratio (HR) = 1.7, 95% confidence interval (CI) = 1.2-2.3 for glioma. For astrocytoma grade IV (glioblastoma multiforme; n = 926) mobile phone use yielded HR = 2.0, 95% CI = 1.4-2.9 and cordless phone use HR = 3.4, 95% CI = 1.04-11 in the same latency category. The hazard ratio for astrocytoma grade IV increased statistically significant per year of latency for wireless phones, HR = 1.020, 95% CI = 1.007-1.033, but not per 100 h cumulative use, HR = 1.002, 95% CI = 0.999-1.005. HR was not statistically significant increased for other types of glioma. Due to the relationship with survival the classification of IARC is strengthened and RF-EMF should be regarded as human carcinogen requiring urgent revision of current exposure guidelines.

Sadetzki S, Chetrit A, Jarus-Hakak A, Cardis E, Deutch Y, Duvdevani S, Zultan A, Novikov I, Freedman L, Wolf M. Cellular phone use and risk of benign and malignant parotid gland tumors--a nationwide case-control study. *Am J Epidemiol*. 167(4):457-467, 2008.

The objective of this nationwide study was to assess the association between cellular phone use and development of parotid gland tumors (PGTs). The methods were based on the international INTERPHONE study that aimed to evaluate possible adverse effects of cellular phone use. The study included 402 benign and 58 malignant incident cases of PGTs diagnosed in Israel at age 18 years or more, in 2001-2003, and 1,266 population individually matched controls. For the entire group, no increased risk of PGTs was observed for ever having been a regular cellular phone user (odds ratio = 0.87; p = 0.3) or for any other measure of exposure investigated. However, analysis restricted to regular users or to conditions that may yield higher levels of exposure (e.g., heavy use in rural areas) showed consistently elevated risks. For ipsilateral use, the odds ratios in the highest category of cumulative number of calls and call time without use of hands-free

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devices were 1.58 (95% confidence interval: 1.11, 2.24) and 1.49 (95% confidence interval: 1.05, 2.13), respectively. The risk for contralateral use was not significantly different from 1. A positive dose-response trend was found for these measurements. Based on the largest number of benign PGT patients reported to date, our results suggest an association between cellular phone use and PGTs.

Richter ED, Berman T, Levy O. Brain cancer with induction periods of less than 10 years in young military radar workers. Arch Environ Health 57(4):270-272, 2002.

The authors have reported on 5 young patients who had brain tumors that appeared within 10 yr of initial occupational exposures to radar. Four of the patients were less than 30 yr of age when the diagnoses were initially made. Brief induction periods that follow high exposures in individual sentinel patients are a recognized indicator of impending group risk, and these periods call attention to the need for precautionary measures. Similarly, reports of short induction periods for brain cancer on the side of the head in which there has been prior use of cell phones may also indicate increased risk.

Hardell L, Carlberg M, Söderqvist F, Mild KH. Case-control study of the association between malignant brain tumours diagnosed between 2007 and 2009 and mobile and cordless phone use. Int J Oncol. 43(6):1833-1845, 2013.

Previous studies have shown a consistent association between long-term use of mobile and cordless phones and glioma and acoustic neuroma, but not for meningioma. When used these phones emit radiofrequency electromagnetic fields (RF-EMFs) and the brain is the main target organ for the handheld phone. The International Agency for Research on Cancer (IARC) classified in May, 2011 RF-EMF as a group 2B, i.e. a 'possible' human carcinogen. The aim of this study was to further explore the relationship between especially long-term (>10 years) use of wireless phones and the development of malignant brain tumours. We conducted a new case-control study of brain tumour cases of both genders aged 18-75 years and diagnosed during 2007-2009. One population-based control matched on gender and age (within 5 years) was used to each case. Here, we report on malignant cases including all available controls. Exposures on e.g. use of mobile phones and cordless phones were assessed by a self-administered questionnaire. Unconditional logistic regression analysis was performed, adjusting for age, gender, year of diagnosis and socio-economic index using the whole control sample. Of the cases with a malignant brain tumour, 87% (n=593) participated, and 85% (n=1,368) of controls in the whole study answered the questionnaire. The odds ratio (OR) for mobile phone use of the analogue type was 1.8, 95% confidence interval (CI)=1.04-3.3, increasing with >25 years of latency (time since first exposure) to an OR=3.3, 95% CI=1.6-6.9. Digital 2G mobile phone use rendered an OR=1.6, 95% CI=0.996-2.7, increasing with latency >15-20 years to an OR=2.1, 95% CI=1.2-3.6. The results for cordless phone use were OR=1.7, 95% CI=1.1-2.9, and, for latency of 15-20 years, the OR=2.1, 95% CI=1.2-3.8. Few participants had used a cordless phone for >20-25 years. Digital type of wireless phones (2G and 3G mobile phones, cordless phones) gave increased risk with latency >1-5 years, then a lower risk in the following latency groups, but again increasing risk with latency

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>15-20 years. Ipsilateral use resulted in a higher risk than contralateral mobile and cordless phone use. Higher ORs were calculated for tumours in the temporal and overlapping lobes. Using the meningioma cases in the same study as reference entity gave somewhat higher ORs indicating that the results were unlikely to be explained by recall or observational bias. This study confirmed previous results of an association between mobile and cordless phone use and malignant brain tumours. These findings provide support for the hypothesis that RF-EMFs play a role both in the initiation and promotion stages of carcinogenesis.

Carlberg M, Hardell L. On the association between glioma, wireless phones, heredity and ionising radiation. Pathophysiology. 19(4):243-252, 2012.

We performed two case-control studies on brain tumours diagnosed during 1 January 1997 to 30 June 2000 and 1 July 2000 to 31 December 2003, respectively. Living cases and controls aged 20-80 years were included. An additional study was performed on deceased cases with a malignant brain tumour using deceased controls. Pooled results for glioma yielded for ipsilateral use of mobile phone odds ratio (OR)=2.9, 95% confidence interval (CI)=1.8-4.7 in the >10 years latency group. The corresponding result for cordless phone was OR=3.8, 95% CI=1.8-8.1. OR increased statistically significant for cumulative use of wireless phones per 100h and per year of latency. For high-grade glioma ipsilateral use of mobile phone gave OR=3.9, 95% CI=2.3-6.6 and cordless phone OR=5.5, 95% CI=2.3-13 in the >10 years latency group. Heredity for brain tumour gave OR=3.4, 95% CI=2.1-5.5 for glioma. There was no interaction with use of wireless phones. X-ray investigation of the head gave overall OR=1.3, 95% CI=1.1-1.7 for glioma without interaction with use of wireless phones or heredity. In conclusion use of mobile and cordless phone increased the risk for glioma with highest OR for ipsilateral use, latency >10 years and third tertile of cumulative use in hours. In total, the risk was highest in the age group <20 years for first use of a wireless phone.

Hardell L, Carlberg M, Hansson Mild K. Mobile phone use and the risk for malignant brain tumors: A case-control study on deceased cases and controls.

Neuroepidemiology. 35(2):109-114, 2010.

We investigated the use of mobile or cordless phones and the risk for malignant brain tumors in a group of deceased cases. Most previous studies have either left out deceased cases of brain tumors or matched them to living controls and therefore a study matching deceased cases to deceased controls is warranted. Recall error is one issue since it has been claimed that increased risks reported in some studies could be due to cases blaming mobile phones as a cause of the disease. This should be of less importance for deceased cases and if cancer controls are used. In this study brain tumor cases aged 20-80 years diagnosed during 1997-2003 that had died before inclusion in our previous studies on the same topic were included. Two control groups were used: one with controls that had died from another type of cancer than brain tumor and one with controls that had died from other diseases. Exposure was assessed by a questionnaire sent to the next-of-kin for both cases and controls. Replies were obtained for 346 (75%) cases, 343 (74%) cancer controls and 276 (60%) controls with other

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diseases. Use of mobile phones gave an increased risk, highest in the >10 years' latency group yielding odds ratio (OR) = 2.4, and 95% confidence interval (CI) = 1.4-4.1. The risk increased with cumulative number of lifetime hours for use, and was highest in the >2,000 h group (OR = 3.4, 95% CI = 1.6-7.1). No clear association was found for use of cordless phones, although OR = 1.7, 95% CI = 0.8-3.4 was found in the group with >2,000 h of cumulative use. This investigation confirmed our previous results of an association between mobile phone use and malignant brain tumors.

Hardell L, Carlberg M, Hansson Mild K. Pooled analysis of two case-control studies on use of cellular and cordless telephones and the risk for malignant brain tumours diagnosed in 1997-2003. *Int Arch Occup Environ Health*. 79(8):630-639, 2006.

Objectives: To study the use of cellular and cordless telephones and the risk for malignant brain tumours. Methods: Two case-control studies on malignant brain tumours diagnosed during 1997-2003 included answers from 905 (90%) cases and 2,162 (89%) controls aged 20-80 years. We present pooled analysis of the results in the two studies. Results: Cumulative lifetime use for >2,000 h yielded for analogue cellular phones odds ratio (OR)=5.9, 95% confidence interval (CI)=2.5-14, digital cellular phones OR=3.7, 95% CI=1.7-7.7, and for cordless phones OR=2.3, 95% CI=1.5-3.6. Ipsilateral exposure increased the risk for malignant brain tumours; analogue OR=2.1, 95% CI=1.5-2.9, digital OR=1.8, 95% CI=1.4-2.4, and cordless OR=1.7, 95% CI=1.3-2.2. For high-grade astrocytoma using >10 year latency period analogue phones yielded OR=2.7, 95% CI=1.8-4.2, digital phones OR=3.8, 95% CI=1.8-8.1, and cordless phones OR=2.2, 95% CI=1.3-3.9. In the multivariate analysis all phone types increased the risk. Regarding digital phones OR=3.7, 95% CI=1.5-9.1 and cordless phones OR=2.1, 95% CI=0.97-4.6 were calculated for malignant brain tumours for subjects with first use <20 years of age, higher than in older persons. Conclusion: Increased risk was obtained for both cellular and cordless phones, highest in the group with >10 years latency period.

Hardell L, Carlberg M, Hansson Mild K. Pooled analysis of two case-control studies on the use of cellular and cordless telephones and the risk of benign brain tumours diagnosed during 1997-2003. *Int J Oncol*. 28(2):509-518, 2006.

The use of cellular and cordless telephones and the risk of brain tumours is of concern since the brain is a high exposure area. We present the results of a pooled analysis of two case-control studies on benign brain tumours diagnosed during 1997-2003 including answers from 1,254 (88%) cases and 2,162 (89%) controls aged 20-80 years. For acoustic neuroma, the use of analogue cellular phones gave an odds ratio (OR) of 2.9 and a 95% confidence interval (CI) of 2.0-4.3; for digital cellular phones, OR=1.5; 95% CI=1.1-2.1; and for cordless telephones, OR=1.5, 95% CI=1.04-2.0. The highest OR was found for analogue phones with a latency period of >15 years; OR=3.8, 95% CI=1.4-10. Regarding meningioma, the results were as follows: for analogue phones, OR=1.3, 95% CI=0.99-1.7; for digital phones, OR=1.1, 95% CI=0.9-1.3; and for cordless phones, OR=1.1, 95% CI=0.9-1.4. In the multivariate analysis, a significantly increased risk of acoustic neuroma was found with the use of analogue phones.

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Richter E, Berman T, Ben-Michael E, Laster R, Westin JB, Cancer in Radar Technicians Exposed to Radiofrequency/Microwave Radiation: Sentinel Episodes. Int J Occup Environ Health 6(3):187-193, 2000.

Controversy exists concerning the health risks from exposures to radiofrequency/microwave irradiation (RF/MW). The authors report exposure-effect relationships in sentinel patients and their co-workers, who were technicians with high levels of exposure to RF/MW radiation. Information about exposures of patients with sentinel tumors was obtained from interviews, medical records, and technical sources. One patient was a member of a cohort of 25 workers with six tumors. The authors estimated relative risks for cancer in this group and latency periods for a larger group of self-reported individuals. Index patients with melanoma of the eye, testicular cancer, nasopharyngioma, non-Hodgkin's lymphoma, and breast cancer were in the 20-37-year age group. Information about work conditions suggested prolonged exposures to high levels of RF/MW radiation that produced risks for the entire body. Clusters involved many different types of tumors. Latency periods were extremely brief in index patients and a larger self-reported group. The findings suggest that young persons exposed to high levels of RF/MW radiation for long periods in settings where preventive measures were lax were at increased risk for cancer. Very short latency periods suggest high risks from high-level exposures. Calculations derived from a linear model of dose-response suggest the need to prevent exposures in the range of 10-100 muw/cm(2).

Hardell L, Carlberg M, Hansson Mild K, Eriksson M. Case-control study on the use of mobile and cordless phones and the risk for malignant melanoma in the head and neck region. Pathophysiology. 18(4):325-333, 2011.

The incidence of cutaneous malignant melanoma has increased during the last decades in Sweden as in many other countries. Besides of ultraviolet radiation and constitutional factors such as light-sensitive skin and poor ability to tan few risk factors are established. Some studies indicate that electromagnetic fields might be of concern. In this case-control study we assessed use of mobile and cordless phones in 347 cases with melanoma in the head and neck region and 1184 controls. These subjects constituted 82% and 80%, respectively, that answered the questionnaire. Overall no increased risk was found. However, in the most exposed area; temporal, cheek and ear, cumulative use >365h of mobile phone yielded in the >1-5-year latency group odds ratio (OR)=2.1, 95% confidence interval (CI)=0.7-6.1 and cordless phone use gave OR=2.1, 95% CI=1.1-3.8. Highest OR was calculated for first use of mobile or cordless phone before the age of 20 years regardless of anatomical localisation in the head and neck region. No interaction was found with established risk factors such as red, medium blond or fair hair colour, blue eyes, skin type I or II (never or sometimes tanned), severe sunburns as teenager or heredity. The results must be interpreted with caution due to low numbers and potential methodological shortcomings in a case-control study. However, the findings might be consistent with a late carcinogenic effect from microwaves, i.e. tumour promotion, but need to be confirmed.

Myung SK, Ju W, McDonnell DD, Lee YJ, Kazinets G, Cheng CT, Moskowitz JM. Mobile

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Phone Use and Risk of Tumors: A Meta-Analysis. *J Clin Oncol.* 27:5565-5572, 2009.

PURPOSE: Case-control studies have reported inconsistent findings regarding the association between mobile phone use and tumor risk. We investigated these associations using a meta-analysis. **METHODS:** We searched MEDLINE (PubMed), EMBASE, and the Cochrane Library in August 2008. Two evaluators independently reviewed and selected articles based on predetermined selection criteria. **RESULTS:** Of 465 articles meeting our initial criteria, 23 case-control studies, which involved 37,916 participants (12,344 patient cases and 25,572 controls), were included in the final analyses. Compared with never or rarely having used a mobile phone, the odds ratio for overall use was 0.98 for malignant and benign tumors (95% CI, 0.89 to 1.07) in a random-effects meta-analysis of all 23 studies. However, a significant positive association (harmful effect) was observed in a random-effects meta-analysis of eight studies using blinding, whereas a significant negative association (protective effect) was observed in a fixed-effects meta-analysis of 15 studies not using blinding. Mobile phone use of 10 years or longer was associated with a risk of tumors in 13 studies reporting this association (odds ratio = 1.18; 95% CI, 1.04 to 1.34). Further, these findings were also observed in the subgroup analyses by methodologic quality of study. Blinding and methodologic quality of study were strongly associated with the research group. **CONCLUSION:** The current study found that there is possible evidence linking mobile phone use to an increased risk of tumors from a meta-analysis of low-biased case-control studies. Prospective cohort studies providing a higher level of evidence are needed.

Hardell L, Mild KH, Carlberg M. Further aspects on cellular and cordless telephones and brain tumours. *Int J Oncol* 22(2):399-407, 2003.

We included in a case-control study on brain tumours and mobile and cordless telephones 1,617 patients aged 20-80 years of both sexes diagnosed during January 1, 1997 to June 30, 2000. They were alive at the study time and had histopathology verified brain tumour. One matched control to each case was selected from the Swedish Population Register. The study area was the Uppsala-Orebro, Stockholm, Linköping and Göteborg medical regions of Sweden. Exposure was assessed by a questionnaire that was answered by 1,429 (88%) cases and 1,470 (91%) controls. In total use of analogue cellular telephones gave an increased risk with odds ratio (OR)=1.3, 95% confidence interval (CI)=1.04-1.6, whereas digital and cordless phones did not overall increase the risk significantly. Ipsilateral use of analogue phones gave OR=1.7, 95% CI=1.2-2.3, digital phones OR=1.3, 95% CI=1.02-1.8 and cordless phones OR=1.2, 95% CI=0.9-1.6. The risk for ipsilateral use was significantly increased for astrocytoma for all studied phone types, analogue phones OR=1.8, 95% CI=1.1-3.2, digital phones OR=1.8, 95% CI=1.1-2.8, cordless phones OR=1.8, 95% CI=1.1-2.9. Use of a telephone on the opposite side of the brain was not associated with a significantly increased risk for brain tumours. Regarding anatomical area of the tumour and exposure to microwaves, the risk was increased for tumours located in the temporal area on the same side of the brain that was used during phone calls, significantly so for analogue cellular telephones OR=2.3, 95% CI=1.2-4.1. For acoustic neurinoma OR=4.4, 95% CI=2.1-9.2 was calculated among analogue

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cellular telephone users. When duration of use was analysed as a continuous variable in the total material, the risk increased per year for analogue phones with OR=1.04, 95% CI=1.01-1.08. For astrocytoma and ipsilateral use the trend was for analogue phones OR=1.10, 95% CI=1.02-1.19, digital phones OR=1.11, 95% CI=1.01-1.22, and cordless phones OR=1.09, 95% CI=1.01-1.19. There was a tendency of a shorter tumour induction period for ipsilateral exposure to microwaves than for contralateral, which may indicate a tumour promotor effect.

Hardell, L., Carlberg, M., Mild, K., 2005. Case-control study of the association between the use of cellular and cordless telephones and malignant brain tumors diagnosed during 2000-2003. Environ Res 100(2):232-241, 2006.

We performed a case-control study on the use of cellular and cordless telephones and the risk for brain tumors diagnosed during 2000-2003. We report the results for malignant brain tumors with data from 317 cases (88%) and 692 controls (84%). The use of analog cellular phones yielded odds ratio (OR) of 2.6 and a 95% confidence interval (CI) of 1.5-4.3, increasing to OR=3.5 and 95% CI=2.0-6.4 with a >10-year latency period. Regarding digital cellular telephones, the corresponding results were OR=1.9, 95% CI=1.3-2.7 and OR=3.6, 95% CI=1.7-7.5, respectively. Cordless telephones yielded OR=2.1, 95% CI=1.4-3.0, and with a >10-year latency period, OR=2.9, 95% CI=1.6-5.2. The OR increased with the cumulative number of hours of use and was highest for high-grade astrocytoma. A somewhat increased risk was also found for low-grade astrocytoma and other types of malignant brain tumors, although not significantly so. In multivariate analysis, all three phone types studied showed an increased risk.

Hardell L, Carlberg M, Hansson Mild K. Case-control study on cellular and cordless telephones and the risk for acoustic neuroma or meningioma in patients diagnosed 2000-2003. Neuroepidemiology 25:120-128, 2005.

We performed a case-control study on the use of cellular and cordless telephones and the risk for brain tumors. We report the results for benign brain tumors with data from 413 cases (89% response rate), 305 with meningioma, 84 with acoustic neuroma, 24 with other types and 692 controls (84% response rate). For meningioma, analogue phones yielded odds ratio (OR) = 1.7, 95% confidence interval (CI) = 0.97-3.0, increasing to OR = 2.1, 95% CI = 1.1-4.3 with a >10-year latency period. Also digital cellular phones and cordless phones increased the risk to some extent. For acoustic neuroma, analogue phones gave OR = 4.2, 95% CI = 1.8-10 increasing to OR = 8.4, 95% CI = 1.6-45 with a >15-year latency period, but based on low numbers. Digital phones yielded OR = 2.0, 95% CI = 1.05-3.8, whereas for cordless phones OR was not significantly increased. In the multivariate analysis, analogue phones represented a significant risk factor for acoustic neuroma.

Hardell L, Eriksson M, Carlberg M, Sundstrom C, Mild KH. Use of cellular or cordless telephones and the risk for non-Hodgkin's lymphoma. Int Arch Occup Environ Health. 78(8):625-632, 2005.

Objectives: To evaluate the use of cellular and cordless telephones as the risk factor for

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non-Hodgkin's lymphoma (NHL). Methods: Male and female subjects aged 18-74 years living in Sweden were included during a period from 1 December 1999 to 30 April 2002. Controls were selected from the national population registry. Exposure to different agents was assessed by questionnaire. Results: In total, 910 (91%) cases and 1016 (92%) controls participated. NHL of the B-cell type was not associated with the use of cellular or cordless telephones. Regarding T-cell NHL and >5 year latency period, the use of analogue cellular phones yielded: odds ratio (OR) = 1.46, 95%; confidence interval (CI) = 0.58-3.70, digital: OR=1.92, 95%; CI=0.77-4.80 and cordless phones: OR=2.47; CI=1.09-5.60. The corresponding results for certain, e.g. cutaneous and leukaemia, T-cell lymphoma for analogue phones were: OR=3.41, 95%; CI=0.78-15.0, digital: OR=6.12, 95%; CI=1.26-29.7 and cordless phones: OR=5.48, 95%; CI=1.26-23.9. Conclusions: The results indicate an association between T-cell NHL and the use of cellular and cordless telephones, however based on low numbers and must be interpreted with caution. Regarding B-cell NHL no association was found.

Hardell L, Carlberg M, Hansson Mild K. Use of cellular telephones and brain tumour risk in urban and rural areas. *Occup Environ Med* 62:390-394, 2005.

Aim: To investigate the association between the use of cellular or cordless telephones and the risk for brain tumours in different geographical areas, urban and rural. Methods: patients aged 20-80 years, living in the middle part of Sweden, and diagnosed between 1 January 1997 and 30 June 2000 were included. One control matched for sex and age in five year age groups was selected for each case. Use of different phone types was assessed by a questionnaire. Results: The number of participating cases was 1429; there were 1470 controls. An effect of rural living was most pronounced for digital cellular telephones. Living in rural areas yielded an odd ratio (OR) of 1.4 (95% CI 0.98 to 2.0), increasing to 3.2 (95% CI 1.2 to 8.4) with > 5 year latency time for digital phones. The corresponding Ors for living in urban areas were 0.9 (95% CI 0.8 to 1.2) and 0.9 (95% CI 0.6 to 1.4), respectively. This effect was most obvious for malignant brain tumours. Conclusion: In future studies, place of residence should be considered in assessment of exposure to microwaves from cellular telephone, although the results in this study must be interpreted with caution due to low numbers in some of the calculations.

Hardell L, Mild KH, Sandstrom M, Carlberg M, Hallquist A, Pahlson A. Vestibular schwannoma, tinnitus and cellular telephones. *Neuroepidemiol* 22:124-129, 2003.

Cases with tinnitus after using analogue cellular telephones are presented. An increased odds ratio of 3.45, 95% confidence interval (CI) 1.77-6.76, was found for vestibular schwannoma (VS) associated with the use of analogue cell phones. During the time period 1960-1998, the age-standardized incidence of VS in Sweden significantly increased yearly by +2.53% (CI 1.71-3.35). A significant increase in the incidence of VS was only found for the latter of the two time period 1960-1979 and 1980-1998. For all other brain tumors taken together, the incidence significantly increased yearly by +0.80% (CI 0.59-1.02) for the time period 1960-1998, although the increase was only significant for benign tumors other than VS during 1960-1979.

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Hardell L, Mild KH, Carlsberg M. Case-control study on the use of cellular and cordless phones and the risk for malignant brain tumours. Int. J. Radiat. Biol. 78:931-936, 2002.

Purpose: To investigate the use of cellular and cordless phones and the risk for malignant brain tumours. Materials and Methods: A case-control study was performed on 649 patients aged 20-80 years of both sexes with malignant brain tumour diagnosed from 1 January 1997 to 30 June 2000. All patients were alive during the time of the study and had histopathology verified brain tumours. One matched control to each case was selected from the Swedish Population Register. The study area was the Uppsala-Orebro, Stockholm, Linkoping and Goteborg medical regions of Sweden. Results: Exposure was assessed by a questionnaire answered by 588 (91%) cases and 581 (90%) controls. Phone usage was defined as 'ever use' and usage starting 1 year before diagnosis was disregarded. Overall, no significantly increased risks were found: analogue cellular phones yielded an odds ratio (OR) = 1.13, 95% confidence interval (CI) = 0.82-1.57, digital cellular phones OR = 1.13, CI = 0.86-1.48, and cordless phones OR = 1.13, CI = 0.85-1.50. For ipsilateral (same side) radiofrequency exposure, analogue mobile phones gave OR = 1.85, CI = 1.16-2.96, for all malignant brain tumours. For astrocytoma, this risk was OR = 1.95, CI = 1.12-3.39. For all malignant brain tumours, digital mobile phones yielded OR = 1.59, CI = 1.05-2.41, and cordless phones yielded OR = 1.46, CI = 0.96-2.23, in the analysis of ipsilateral exposure. Conclusion: The ipsilateral use of an analogue cellular phone yielded a significantly increased risk for malignant brain tumours.

Hardell L, Hallquist A, Hansson Mild K, Carlberg M, Pahlson A, Lilja A. cellular and cordless telephones and the risk for brain tumours. Europ J Cancer Prevent 11:377-386, 2002.

Microwave exposure from the use of cellular telephones has been discussed in recent years as a potential risk factor for brain tumours. We included in a case-control study 1617 patients aged 20-80 years of both sexes with brain tumour diagnosed between 1 January 1997 and 30 June 2000. They were alive at the study time and had histopathologically verified brain tumour. One matched control to each case was selected from the Swedish Population Register. The study area was the Uppsala-Orebro, Stockholm, Linkoping and Goteborg medical regions of Sweden. Exposure was assessed by a questionnaire that was answered by 1429 (88%) cases and 1470 (91%) controls. In total, use of analogue cellular telephones gave an increased risk with an odds ratio (OR) of 1.3 (95% confidence interval (CI) 1.02-1.6). With a tumour induction period of >10 years the risk increased further; OR 1.8 (95% CI 1.1-2.9). No clear association was found for digital or cordless telephones. With regard to the anatomical area of the tumour and exposure to microwaves, the risk was increased for tumours located in the temporal area on the same side of the brain that was used during phone calls; for analogue cellular telephones the OR was 2.5 (95% CI 1.3-4.9). Use of a telephone on the opposite side of the brain was not associated with an increased risk for brain tumours. With regard to different tumour types, the highest risk was for acoustic neurinoma (OR 3.5, 95% CI 1.8-6.8) among analogue cellular telephone users.

Hardell L, Nasman A, Pahlson A, Hallquist A. Case-control study on radiology work,

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medical x-ray investigations, and use of cellular telephones as risk factors for brain tumors. Medscape General Medicine May 4, 2000.

Abstract. Context. Ionizing radiation is a well-established risk factor for brain tumors. During recent years, microwave exposure from the use of cellular telephones has been discussed as a potential risk factor. **Objective.** To determine risk factors for brain tumors. **Design.** A case-control study, with exposure assessed by questionnaires. **Participants.** A total of 233 currently living men and women, aged 20 to 80 years, were included. The case patients had histopathologically verified brain tumors and lived in the Uppsala-Orebro region (1994-1996) or the Stockholm region (1995-1996). Two matched controls to each case were selected from the Swedish Population Register. **Main Outcome Measures.** Ionizing radiation and use of cellular telephones as risk factors for brain tumors. **Results.** A total of 209 cases (90%) and 425 controls (91%) answered the questionnaire. Work as a physician yielded an odds ratio (OR) of 6.00, with a 95% confidence interval (CI) of 0.62 to 57.7. All three case patients had worked with fluoroscopy. Radiotherapy of the head and neck region yielded an OR of 3.61 (95% CI, 0.65-19.9). Medical diagnostic x-ray examination of the same area yielded an OR of 2.10 (95% CI, 1.25-3.53), with a tumor induction period of 5 years or more. Chemical industry work yielded an OR of 4.10 (95% CI, 1.25-13.4), and laboratory work yielded an OR of 3.21 (95% CI, 1.16-8.85). Ipsilateral use of cellular telephones increased the risk for tumors in the temporal, temporoparietal, and occipital lobes (OR, 2.42; 95% CI, 0.97-6.05), ie, the anatomic areas with highest exposure to microwaves from a mobile telephone. The result was further strengthened (OR, 2.62; 95% CI, 1.02-6.71) in a multivariate analysis that included laboratory work and medical diagnostic x-ray investigations of the head and neck. **Conclusion.** Exposure to ionizing radiation, work in laboratories, and work in the chemical industry increased the risk of brain tumors. Use of a cellular telephone was associated with an increased risk in the anatomic area with highest exposure.

Di Carlo A, White N, Guo F, Garrett P, Litovitz T. Chronic electromagnetic field exposure decreases HSP70 levels and lowers cytoprotection. J. Cell. Biochem. 84: 447-454, 2002.

Electromagnetic field (EMF) exposures have been shown to induce heat shock proteins (HSPs), which help to maintain the conformation of cellular proteins during periods of stress. We have previously reported that short-term exposure of chick embryos to either 60 Hz (extremely low frequency: ELF), or radio-frequency (RF: 915 MHz) EMFs induce protection against hypoxia. Experiments presented in the current report are based on a study in which long-term (4 days), continuous exposure to ELF-EMFs decreased protection against ultraviolet radiation. Based on this result, it was hypothesized that de-protection against hypoxia should also occur following long-term, continuous, or daily, repeated exposures to EMFs. To test this hypothesis, chick embryos were exposed to ELF-EMFs (8 μ T) continuously for 4 days, or to ELF or RF (3.5 mW incident power)- EMFs repeated daily (20, 30, or 60 min once or twice daily for 4 days). Several of the exposure protocols yielded embryos that had statistically significant decreases in protection against hypoxic stress (continuous and 30 or 60 min ELF twice

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daily; or 30 or 60 min once daily RF). This is consistent with our finding that following 4 days of ELF-EMF exposure, HSP70 levels decline by 27% as compared to controls. In addition, the superposition of ELF-EM noise, previously shown to minimize ELF-EMF induced hypoxia protection, inhibited hypoxia de-protection caused by long term, continuous ELF or daily, repeated RF exposures. This EMF-induced decrease in HSP70 levels and resulting decline in cytoprotection suggests a mechanism by which daily exposure (such as might be experienced by mobile phone users) could enhance the probability of cancer and other diseases.

Hardell, L, Nasman, A, Pahlson, A, Hallquist, A, Hansson Mild, K, Use of cellular telephones and the risk for brain tumours: A case-control study. Int J Oncol 15(1):113-116, 1999.

The use of cellular telephones has increased dramatically during the 1990's in the world. In the 1980's the analogue NMT system was used whereas the digital GSM system was introduced in early 1990's and is now the preferred system. Case reports of brain tumours in users initiated this case-control study on brain tumours and use of cellular telephones. Also other exposures were assessed. All cases, both males and females, with histopathologically verified brain tumour living in Uppsala-Orebro region (1994-96) and Stockholm region (1995-96) aged 20-80 at the time of diagnosis and alive at start of the study were included, 233 in total. Two controls to each case were selected from the Swedish Population Register matched for sex, age and study region. Exposure was assessed by questionnaires supplemented over the phone. The analyses were based on answers from 209 (90%) cases and 425 (91%) controls. Use of cellular telephone gave odds ratio (OR) = 0.98 with 95% confidence interval (CI) = 0.69-1.41. For the digital GSM system OR = 0.97, CI = 0.61-1.56 and for the analogue NMT system OR = 0.94, CI = 0.62-1.44 were calculated. Dose-response analysis and using different tumour induction periods gave similar results. Non-significantly increased risk was found for tumour in the temporal or occipital lobe on the same side as a cellular phone had been used, right side OR = 2.45, CI = 0.78-7.76, left side OR = 2.40, CI = 0.52-10.9 Increased risk was found only for use of the NMT system. For GSM use the observation time is still too short for definite conclusions. An increased risk for brain tumour in the anatomical area close to the use of a cellular telephone should be especially studied in the future.

Hardell L, Carlberg M. Mobile phones, cordless phones and the risk for brain tumours. Int J Oncol. 35(1):5-17, 2009.

The Hardell-group conducted during 1997-2003 two case control studies on brain tumours including assessment of use of mobile phones and cordless phones. The questionnaire was answered by 905 (90%) cases with malignant brain tumours, 1,254 (88%) cases with benign tumours and 2,162 (89%) population-based controls. Cases were reported from the Swedish Cancer Registries. Anatomical area in the brain for the tumour was assessed and related to side of the head used for both types of wireless phones. In the current analysis we defined ipsilateral use (same side as the tumour) as $\geq 50\%$ of the use and contralateral use (opposite side) as $< 50\%$ of the calling time. We report now further results for use of mobile and cordless phones. Regarding

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astrocytoma we found highest risk for ipsilateral mobile phone use in the >10 year latency group, OR=3.3, 95% CI=2.0-5.4 and for cordless phone use OR=5.0, 95% CI=2.3-11. In total, the risk was highest for cases with first use <20 years age, for mobile phone OR=5.2, 95% CI=2.2-12 and for cordless phone OR=4.4, 95% CI=1.9-10. For acoustic neuroma, the highest OR was found for ipsilateral use and >10 year latency, for mobile phone OR=3.0, 95% CI=1.4-6.2 and cordless phone OR=2.3, 95% CI=0.6-8.8. Overall highest OR for mobile phone use was found in subjects with first use at age <20 years, OR=5.0, 95% CI 1.5-16 whereas no association was found for cordless phone in that group, but based on only one exposed case. The annual age-adjusted incidence of astrocytoma for the age group >19 years increased significantly by +2.16%, 95% CI +0.25 to +4.10 during 2000-2007 in Sweden in spite of seemingly underreporting of cases to the Swedish Cancer Registry. A decreasing incidence was found for acoustic neuroma during the same period. However, the medical diagnosis and treatment of this tumour type has changed during recent years and underreporting from a single center would have a large impact for such a rare tumour.

Hardell L, Hansson Mild K, Pahlson A, Hallquist A, Ionizing radiation, cellular telephones and the risk of brain tumours. *Europ J Cancer Prevent* 10:523-529, 2001.

A case-control study on brain tumours included 233 patients aged 20-80 years and alive at the study time. They had histopathologically verified brain tumour and lived in the Upsala-Orebro region (1994-1996) or in Stockholm region (1995-1996). Two matched controls to each case were selected from the Swedish Population Register. Two hundred and nine cases (90%) and 425 controls (91%) answered the questionnaire. Results are presented for the whole study group, as given here, and for malignant and benign tumours separately. For workers in the chemical industry the odds ratio (OR) was 4.10, 95% confidence interval (95% CI) 1.25-13.4 and laboratory workers OR 3.21, 95%CI 1.16-8.85. Radiotherapy of the head and neck region gave OR 3.61, 95% CI 0.65-19.9. Medical diagnostic X-ray of the same area yielded OR 1.64, 95% CI 1.04-2.58. Work as a physician gave OR 6.00, 95% CI 0.62-57.7. All three cases had worked with fluoroscopy. Ipsilateral (same side) use of a cellular telephone increased the risk of tumours in the temporal, temporo-parietal and occipital areas, with OR 2.42, 95% CI 0.97-6.05 (i.e., the anatomical areas with highest exposure to microwaves from a mobile phone).

Hardell, L, Reizenstein, J, Johansson, B, Gertzen, H, Mild, KH, Angiosarcoma of the scalp and use of a cordless (portable) telephone. *Epidemiology* 10(6):785-786, 1999.

This is a case study of a 57-year old woman who was diagnosed in January 1999 with an angiosarcoma of the scalp on the left side of her head (2 cm above her ear). Angiosarcoma is a rare type of soft tissue sarcoma (STS). Since 1988, the patient had, on a regular basis (1 hr per day), used a cordless (portable) phone, always using her left ear. Starting in 1994, she also used a GSM (digital) mobile phone on her left ear (a few minutes per week). The exposure to microwaves from a cordless phone in this patient is of interest because she had exposure on a daily basis starting 10 years before the first clinical signs of her angiosarcoma. Moreover, the tumor developed in the anatomical area with the highest exposure to microwaves on the same side of the head that she

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had used the phone. She also reported no exposure to other know risk factors for STS.

Leszczynski D, Joenväärä S, Reivinen J, Kuokka R, Non-thermal activation of the hsp27/p38MAPK stress pathway by mobile phone radiation in human endothelial cells: Molecular mechanism for cancer- and blood-brain barrier-related effects.

Differentiation 70:120–129, 2002.

Abstract We have examined whether non-thermal exposures of cultures of the human endothelial cell line EA.hy926 to 900 MHz GSM mobile phone microwave radiation could activate stress response. Results obtained demonstrate that 1-hour non-thermal exposure of EA.hy926 cells changes the phosphorylation status of numerous, yet largely unidentified, proteins. One of the affected proteins was identified as heat shock protein-27 (hsp27). Mobile phone exposure caused a transient increase in phosphorylation of hsp27, an effect which was prevented by SB203580, a specific inhibitor of p38 mitogen-activated protein kinase (p38MAPK). Also, mobile phone exposure caused transient changes in the protein expression levels of hsp27 and p38MAPK. All these changes were non-thermal effects because, as determined using temperature probes, irradiation did not alter the temperature of cell cultures, which remained throughout the irradiation period at $37 \pm 0.3^\circ\text{C}$. Changes in the overall pattern of protein phosphorylation suggest that mobile phone radiation activates a variety of cellular signal transduction pathways, among them the hsp27/p38MAPK stress response pathway. Based on the known functions of hsp27, we put forward the hypothesis that mobile phone radiation-induced activation of hsp27 may (i) facilitate the development of brain cancer by inhibiting the cytochrome c/caspase-3 apoptotic pathway and (ii) cause an increase in blood-brain barrier permeability through stabilization of endothelial cell stress fibers. We postulate that these events, when occurring repeatedly over a long period of time, might become a health hazard because of the possible accumulation of brain tissue damage. Furthermore, our hypothesis suggests that other brain damaging factors may co-participate in mobile phone radiation-induced effects.

Hansson Mild K, Hardell L, Carlberg M. Pooled analysis of two Swedish case-control studies on the use of mobile and cordless telephones and the risk of brain tumours diagnosed during 1997-2003. *Int J Occup Saf Ergon* 13(1):63-71, 2007.

Here we present the pooled analysis of 2 case-control studies on the association of brain tumours with mobile phone use. Use of analogue cellular phones increased the risk for acoustic neuroma by 5%, 95% confidence interval (CI) = 2-9% per 100 hrs of use. The risk increased for astrocytoma grade III-IV with latency period with highest estimates using >10-year time period from first use of these phone types. The risk increased per one year of use of analogue phones by 10%, 95% CI = 6-14%, digital phones by 11%, 95% CI = 6-16%, and cordless phones by 8%, 95% CI = 5-12%. For all studied phone types OR for brain tumours, mainly acoustic neuroma and malignant brain tumours, increased with latency period, especially for astrocytoma grade III-IV.

Lourencini da Silva R , Albano F, Lopes dos Santos LR , Tavares AD, Felzenszwalb I, The effect of electromagnetic field exposure on the formation of DNA lesions. *Redox Rep*

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5(5):299-301, 2000.

In an attempt to determine whether electromagnetic field (EMF) exposure might lead to DNA damage, we exposed SnCl₂-treated pBR322 plasmids to EMF and analysed the resulting conformational changes using agarose gel electrophoresis. An EMF-dependent potentiation of DNA scission (i.e. the appearance of relaxed plasmids) was observed. In confirmation of this, plasmids pre-exposed to EMF also were less capable of transforming *Escherichia coli*. The results indicate that EMF, in the presence of a transition metal, is capable of causing DNA damage. These observations support the idea that EMF, probably through secondary generation of reactive oxygen species, can be clastogenic and provide a possible explanation for the observed correlation between EMF exposure and the frequency of certain types of cancers in humans.

Muscat JE, Malkin MG, Shore RE, Thompson S, Neugut AL, Stellman SD, Bruce J. Handheld cellular telephones and risk of acoustic neuroma. *Neurology* 58:1304-1306, 2002.

The hypothesis that intracranial energy deposition from handheld cellular telephones causes acoustic neuroma was tested in an epidemiologic study of 90 patients and 86 control subjects. The relative risk was 0.9 ($p = 0.07$) and did not vary significantly by the frequency, duration, and lifetime hours of use. In patients who used cellular telephones, the tumor occurred more often on the contralateral than ipsilateral side of the head. Further efforts should focus on potentially longer induction periods.

Mashevich M, Folkman D, Kesar A, Barbul A, Korenstein R, Jerby E, Avivi L, Exposure of human peripheral blood lymphocytes to electromagnetic fields associated with cellular phones leads to chromosomal instability. *Bioelectromagnetics* 24:82-90, 2003.

Whether exposure to radiation emitted from cellular phones poses a health hazard is at the focus of current debate. We have examined whether in vitro exposure of human peripheral blood lymphocytes (PBL) to continuous 830 MHz electromagnetic fields causes losses and gains of chromosomes (aneuploidy), a major "somatic mutation" leading to genomic instability and thereby to cancer. PBL were irradiated at different average absorption rates (SAR) in the range of 1.6-8.8 W/kg for 72 hr in an exposure system based on a parallel plate resonator at temperatures ranging from 34.5-37.5 °C. The averaged SAR and its distribution in the exposed tissue culture flask were determined by combining measurements and numerical analysis based on a finite element simulation code. A linear increase in chromosome 17 aneuploidy was observed as a function of the SAR value, demonstrating that this radiation has a genotoxic effect. The SAR dependent aneuploidy was accompanied by an abnormal mode of replication of the chromosome 17 region engaged in segregation (repetitive DNA arrays associated with the centromere), suggesting that epigenetic alterations are involved in the SAR dependent genetic toxicity. Control experiments (i.e., without any RF radiation) carried out in the temperature range of 34.5-38.5 °C showed that elevated temperature is not associated with either the genetic or epigenetic alterations observed following RF radiation - the increased levels of aneuploidy and the modification in replication of the centromeric DNA arrays. These findings indicate that the genotoxic effect of the

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electromagnetic radiation is elicited via a non-thermal pathway. Moreover, the fact that aneuploidy is a phenomenon known to increase the risk for cancer, should be taken into consideration in future evaluation of exposure guidelines.

Akhavan-Sigari R, Baf MM, Ariabod V, Rohde V, Rahighi S. Connection between Cell Phone use, p53 Gene Expression in Different Zones of Glioblastoma Multiforme and Survival Prognoses. Rare Tumors. 2014 Aug 8;6(3):5350. doi: 10.4081/rt.2014.5350.

The aim of this paper is to investigate p53 gene expression in the central and peripheral zones of glioblastoma multiforme using a real-time reverse transcription polymerase chain reaction (RT-PCR) technique in patients who use cell phones ≥ 3 hours a day and determine its relationship to clinicopathological findings and overall survival. Sixty-three patients (38 males and 25 females), diagnosed with glioblastoma multiforme (GBM), underwent tumor resection between 2008 and 2011. Patient ages ranged from 25 to 88 years, with a mean age of 55. The levels of expression of p53 in the central and peripheral zone of the GBM were quantified by RT-PCR. Data on p53 gene expression from the central and peripheral zone, the related malignancy and the clinicopathological findings (age, gender, tumor location and size), as well as overall survival, were analyzed. Forty-one out of 63 patients (65%) with the highest level of cell phone use (≥ 3 hours/day) had higher mutant type p53 expression in the peripheral zone of the glioblastoma; the difference was statistically significant ($P=0.034$). Results from the present study on the use of mobile phones for ≥ 3 hours a day show a consistent pattern of increased risk for the mutant type of p53 gene expression in the peripheral zone of the glioblastoma, and that this increase was significantly correlated with shorter overall survival time. The risk was not higher for ipsilateral exposure. We found that the mutant type of p53 gene expression in the peripheral zone of the glioblastoma was increased in 65% of patients using cell phones ≥ 3 hours a day.

Ozgur E, Guler G, Kismali G, Seyhan N. Mobile Phone Radiation Alters Proliferation of Hepatocarcinoma Cells. Cell Biochem Biophys. 2014 May 11. [Epub ahead of print]

This study investigated the effects of intermittent exposure (15 min on, 15 min off for 1, 2, 3, or 4 h, at a specific absorption rate of 2 W/kg) to enhanced data rates for global system for mobile communication evolution-modulated radiofrequency radiation (RFR) at 900- and 1,800-MHz frequencies on the viability of the Hepatocarcinoma cells (Hep G2). Hep G2 cell proliferation was measured by a colorimetric assay based on the cleavage of the tetrazolium salt WST-1 by mitochondrial dehydrogenases in viable cells. Cell injury was evaluated by analyzing the levels of lactate dehydrogenase (LDH) and glucose released from lysed cells into the culture medium. Morphological observation of the nuclei was carried out by 4',6-diamidino-2-phenylindole (DAPI) staining using fluorescence microscopy. In addition, TUNEL assay was performed to confirm apoptotic cell death. It was observed that cell viability, correlated with the LDH and glucose levels, changed according to the frequency and duration of RFR exposure. Four-hour exposure produced more pronounced effects than the other exposure durations. 1,800-MHz RFR had a larger impact on cell viability and Hep G2 injury than the RFR at 900 MHz. Morphological observations also supported the biochemical results indicating that most

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of the cells showed irregular nuclei pattern determined by using the DAPI staining, as well as TUNEL assay which shows DNA damage especially in the cells after 4 h of exposure to 1,800-MHz RFR. Our results indicate that the applications of 900- and 1,800-MHz (2 W/kg) RFR cause to decrease in the proliferation of the Hep G2 cells after 4 h of exposure. Further studies will be conducted on other frequency bands of RFR and longer duration of exposure.

Zeng QL, Weng Y, Chen GD, Lu DQ, Chiang H, Xu ZP [Effects of GSM 1800 MHz radiofrequency electromagnetic fields on protein expression profile of human breast cancer cell MCF-7.] Zhonghua Yu Fang Yi Xue Za Zhi. 40(3):153-158, 2006. [Article in Chinese]

OBJECTIVE: To study the effects of GSM 1800 MHz radiofrequency electromagnetic fields (RF EMF) exposure on protein expression profile of human breast cancer cell line (MCF-7), as to exploring the possible effects on normal cell physiological function.
METHODS: MCF-7 cells were continuously or intermittently (5 minutes field on followed by 10 minutes off) exposed to RF EMF for different duration (1 hour, 3 hours, 6 hours, 12 hours, or 24 hours) at an average specific absorption rate (SAR) of 3.5 W/kg. The extracted proteins were separated by 2-dimensional electrophoresis and the protein-spot distribution of the sliver-stained gels was analyzed by using PDQuest software 7.1. Each experiment was repeated three times. RESULTS: On the average, around 1100 proteins were detected using pH 4 - 7 IPG strip. There were no differential proteins found under continuous exposure at SAR of 3.5 W/kg for 6 hours. Under other exposure conditions, we found various differentially expressed proteins in exposure groups as compared with the sham-exposed controls. Especially in 3 hours intermittent exposure and 12 hours continuous exposure, eighteen and seven differential proteins were detected, respectively. The categories and functions of these differentially expressed proteins were analyzed by searching of SWISS-PROT protein database, which suggested that these proteins should be related to the functions of biosynthesis, signal transduction, and DNA damage and repair. CONCLUSIONS: Data indicated that the protein expression changes induced by RF radiation might depend on exposure duration and mode. Many biological processes might be affected by RF exposure.

Marinelli F, La Sala D, Ciccio G, Cattini L, Trimarchi C, Putti S, Zamparelli A, Giuliani L, Tomassetti G, Cinti C. Exposure to 900 MHz electromagnetic field induces an unbalance between pro-apoptotic and pro-survival signals in T-lymphoblastoid leukemia CCRF-CEM cells. J Cell Physiol. 198(2):324-332, 2004.

It has been recently established that low-frequency electromagnetic field (EMFs) exposure induces biological changes and could be associated with increased incidence of cancer, while the issue remains unresolved as to whether high-frequency EMFs can have hazardous effect on health. Epidemiological studies on association between childhood cancers, particularly leukemia and brain cancer, and exposure to low- and high-frequency EMF suggested an etiological role of EMFs in inducing adverse health effects. To investigate whether exposure to high-frequency EMFs could affect in vitro cell survival, we cultured acute T-lymphoblastoid leukemia cells (CCRF-CEM) in the

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presence of unmodulated 900 MHz EMF, generated by a transverse electromagnetic (TEM) cell, at various exposure times. We evaluated the effects of high-frequency EMF on cell growth rate and apoptosis induction, by cell viability (MTT) test, FACS analysis and DNA ladder, and we investigated pro-apoptotic and pro-survival signaling pathways possibly involved as a function of exposure time by Western blot analysis. At short exposure times (2-12 h), unmodulated 900 MHz EMF induced DNA breaks and early activation of both p53-dependent and -independent apoptotic pathways while longer continuous exposure (24-48 h) determined silencing of pro-apoptotic signals and activation of genes involved in both intracellular (Bcl-2) and extracellular (Ras and Akt1) pro-survival signaling. Overall our results indicate that exposure to 900 MHz continuous wave, after inducing an early self-defense response triggered by DNA damage, could confer to the survivor CCRF-CEM cells a further advantage to survive and proliferate.

Kundi M. The controversy about a possible relationship between mobile phone use and cancer. *Cien Saude Colet.* 15(5):2415-2430, 2010.

Over the last decade, mobile phone use increased to almost 100% prevalence in many countries. Evidence for potential health hazards accumulated in parallel by epidemiologic investigations has raised controversies about the appropriate interpretation and the degree of bias and confounding responsible for reduced or increased risk estimates. Overall, 33 epidemiologic studies were identified in the peer-reviewed literature, mostly (25) about brain tumors. Methodologic considerations revealed that three important conditions for epidemiologic studies to detect an increased risk are not met: no evidence-based exposure metric is available; the observed duration of mobile phone use is generally still too low; no evidence-based selection of end points among the grossly different types of neoplasias is possible because of lack of etiologic hypotheses. The overall evidence speaks in favor of an increased risk, but its magnitude cannot be assessed at present because of insufficient information on long-term use.

Repacholi, MH, Basten, A, Gebiski, V, Noonan, D, Finnie, J, Harris, AW, Lymphomas in E mu-Pim1 transgenic mice exposed to pulsed 900 MHz electromagnetic fields. *Radiat Res* 147(5):631-640, 1997.

Whether radiofrequency (RF) fields are carcinogenic is controversial; epidemiological data have been inconclusive and animal tests limited. The aim of the present study was to determine whether long-term exposure to pulse-modulated RF fields similar to those used in digital mobile telecommunications would increase the incidence of lymphoma in E mu-Pim1 transgenic mice, which are moderately predisposed to develop lymphoma spontaneously. One hundred female E mu-Pim1 mice were sham-exposed and 101 were exposed for two 30-min periods per day for up to 18 months to plane-wave fields of 900 MHz with a pulse repetition frequency of 217 Hz and a pulse width of 0.6 ms. Incident power densities were 2.6-13 W/m² and specific absorption rates were 0.008-4.2 W/kg, averaging 0.13-1.4 W/kg. Lymphoma risk was found to be significantly higher in the exposed mice than in the controls (OR = 2.4. P = 0.006, 95% CI = 1.3-4.5). Follicular

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lymphomas were the major contributor to the increased tumor incidence. Thus long-term intermittent exposure to RF fields can enhance the probability that mice carrying a lymphomagenic oncogene will develop lymphomas. We suggest that such genetically cancer-prone mice provide an experimental system for more detailed assessment of dose-response relationships for risk of cancer after RF-field exposure.

Hruby R, Neubauer G, Kuster N, Frauscher M Study on potential effects of "902-MHz GSM-type Wireless Communication Signals" on DMBA-induced mammary tumours in Sprague-Dawley rats. *Mutat Res.* 649(1-2):34-44, 2008.

The aim of the study was to detect whether long-term exposure to "902-MHz GSM-type Wireless Communication Signals" ("radio-frequency (RF)-exposure") would affect 7,12-dimethylbenz(a)anthracene (DMBA)-induced mammary tumours in female Sprague-Dawley rats. Five hundred female rats were each given a single oral dose of 17mg DMBA per kg body weight (bw) at an age of 46-48 days. Three groups of 100 animals each were RF-exposed (902MHz; crest factor 8; pulse width=0.57ms) from the next day onwards to normal whole-body averaged doses (expressed as specific absorption rate, SAR) of 0.4, 1.3 or 4.0W/kg bw (low/mid/high-dose group) for 4h/d, 5d/week, during 6 months. A sham-exposed and a cage-control group remained without RF-exposure ($<0.01\text{mW/kg}$). Animals were weekly weighed and palpated for mammary tumours; all mammary glands were examined histopathologically. There were several statistically significant differences between RF-exposed groups and the sham-exposed group, as follows: All RF-exposed groups had, at different times, significantly more palpable tissue masses. There were fewer animals with benign neoplasms, but more with malignant tumours in the high-dose group. In addition, there were more adenocarcinomas in the low-dose group, more malignant neoplasms in the low- and high-dose groups, more animals with adenocarcinomas in the high-dose group, and fewer animals with fibroadenomas in the low- and mid-dose groups. The cage-control group had, when compared with the sham-exposed group, statistically significantly more palpable tissue masses, more benign and also more malignant neoplasms. The cage-control group had in most aspects the highest incidence and malignancy of neoplasms among all groups. None of the above findings in RF-exposed animals produced a clear dose-response relation and the responses of the cage-control group were either similar to or stronger than those of any of the RF-exposed group. The significant differences between the sham-exposed animals and one or more RF-exposed groups may be interpreted as evidence of an effect of RF-exposure. In the context of the results of the cage-control group, in the light of controversial results reported in the literature, and given the fact that the DMBA-mammary tumour model is known to be prone to high variations in the results, it is the authors' opinion that the differences between the groups are rather incidental ones.

Yang L, Hao D, Wang M, Zeng Y, Wu S, Zeng Y. Cellular Neoplastic Transformation Induced by 916 MHz Microwave Radiation. *Cell Mol Neurobiol.*32(6):1039-1046, 2012.

There has been growing concern about the possibility of adverse health effects resulting from exposure to microwave radiations, such as those emitted by mobile phones. The purpose of this study was to investigate the cellular neoplastic transformation effects of

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electromagnetic fields. 916 MHz continuous microwave was employed in our study to simulate the electromagnetic radiation of mobile phone. NIH/3T3 cells were adopted in our experiment due to their sensitivity to carcinogen or cancer promoter in environment. They were divided randomly into one control group and three microwave groups. The three microwave groups were exposed to 916 MHz EMF for 2 h per day with power density of 10, 50, and 90 w/m², respectively, in which 10 w/m² was close to intensity near the antenna of mobile phone. The morphology and proliferation of NIH/3T3 cells were examined and furthermore soft agar culture and animal carcinogenesis assay were carried out to determine the neoplastic promotion. Our experiments showed NIH/3T3 cells changed in morphology and proliferation after 5-8 weeks exposure and formed clone in soft agar culture after another 3-4 weeks depending on the exposure intensity. In the animal carcinogenesis study, lumps developed on the back of SCID mice after being inoculated into exposed NIH/3T3 cells for more than 4 weeks. The results indicate that microwave radiation can promote neoplastic transformation of NIH/3T3 cells.

Trivino Pardo JC, Grimaldi S, Taranta M, Naldi I, Cinti C. Microwave electromagnetic field regulates gene expression in T-lymphoblastoid leukemia CCRF-CEM cell line exposed to 900 MHz. *Electromagn Biol Med.* 31(1):1-18, 2012.

Electric, magnetic, and electromagnetic fields are ubiquitous in our society, and concerns have been expressed regarding possible adverse effects of these exposures. Research on Extremely Low-Frequency (ELF) magnetic fields has been performed for more than two decades, and the methodology and quality of studies have improved over time. Studies have consistently shown increased risk for childhood leukemia associated with ELF magnetic fields. There are still inadequate data for other outcomes. More recently, focus has shifted toward Radio Frequencies (RF) exposures from mobile telephony. There are no persuasive data suggesting a health risk, but this research field is still immature with regard to the quantity and quality of available data. This technology is constantly changing and there is a need for continued research on this issue. To investigate whether exposure to high-frequency electromagnetic fields (EMF) could induce adverse health effects, we cultured acute T-lymphoblastoid leukemia cells (CCRF-CEM) in the presence of 900 MHz MW-EMF generated by a transverse electromagnetic (TEM) cell at short and long exposure times. We evaluated the effect of high-frequency EMF on gene expression and we identified functional pathways influenced by 900 MHz MW-EMF exposure.

Hartikka H, Heinävaara S, Mäntylä R, Kähärä V, Kurtio P, Auvinen A. Mobile phone use and location of glioma: A case-case analysis. *Bioelectromagnetics.* 30(3):176-182, 2009.

We assessed a new approach for evaluating the glioma risk among users of mobile phones to focus on the part of the brain most heavily exposed to radiofrequency electromagnetic fields from mobile phones. The tumor midpoint was defined from radiological imaging. A case-case analysis with 99 gliomas was performed using logistic regression. The exposed cases were those with the tumor mid-point within 4.6 cm from

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the line between the mouth and the external meatus of the ear, representing the most likely location of the mobile phone (the source of exposure). Alternative analyses based on various indicators of mobile phone use as the outcome were also carried out. The majority of cases were regular mobile phone users. A slightly higher proportion of gliomas among mobile phone users than non-users occurred within 4.6 cm from the presumed location of the mobile phone (28% vs. 14%). Modestly elevated odds ratios were observed for several indicators of mobile phone use, but without an exposure gradient. The highest odds ratios were found for contralateral and short-term use. Our results, though limited by the small sample size, demonstrate that detailed information on tumor location allows evaluation of the risk related to the most heavily exposed part of the brain, representing direct evaluation of the possible local carcinogenic effects of the radiofrequency fields. However, field strength varies between users and over time also within a given anatomic site, due to the output power of the phone. Collaborative analysis of a larger sample is planned.

Salahaldin AH, Bener A. Long-term and frequent cellular phone use and risk of acoustic neuroma. Int Tinnitus J. 12(2):145-148, 2006.

Human exposure to radio frequency radiation has increased dramatically during recent years from widespread use of mobile phones, and in some studies this exposure has been linked to the development of acoustic neuroma. The aim of our study was to describe the epidemiology of acoustic neuroma in a newly developed country, Qatar. We reviewed all cases of acoustic neuroma registered at the Hamad Medical Corporation during the period 2004-2005. We collected and assessed the sociodemographic information, presenting complaints, audiological evaluation, and laboratory investigations. During the study period, we diagnosed acoustic neuroma in 13 patients (10 women, median age 55 years, and 3 men, median age 49 years). Most of the cell phones were used daily for an average of 14 times per day (range, 8-20 times) and had been used for the duration of more than 5 years, with the exception of 3 patients who had used the cell phone excessively (> 20 minutes per call more than five times daily) owing to the nature of their jobs. The total incidence rate for Qatar was found to be 17.2 per million population. In conclusion, the incidence of acoustic neuroma in Qatar is slightly higher than that in other countries. Despite the presence of facilities in Qatar, no proper screening and management protocol is available. This study highlights the need for the development and implementation of a national registry plan whereby effective care services can be delivered and high-risk groups can be targeted.

de Vocht F, Hannam K, Buchan I. Environmental risk factors for cancers of the brain and nervous system: the use of ecological data to generate hypotheses. Occup Environ Med. 2013 Jan 23. [Epub ahead of print]

BACKGROUND: There is a public health need to balance timely generation of hypotheses with cautious causal inference. For rare cancers this is particularly challenging because standard epidemiological study designs may not be able to elucidate causal factors in an early period of newly emerging risks. Alternative methodologies need to be considered for generating and shaping hypotheses prior to definitive investigation. OBJECTIVES: To

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evaluate whether open-access databases can be used to explore links between potential risk factors and cancers at an ecological level, using the case study of brain and nervous system cancers as an example. **METHODS:** National age-adjusted cancer incidence rates were obtained from the GLOBOCAN 2008 resource and combined with data from the United Nations Development Report and the World Bank list of development indicators. Data were analysed using multivariate regression models. **RESULTS:** Cancer rates, potential confounders and environmental risk factors were available for 165 of 208 countries. 2008 national incidences of brain and nervous system cancers were associated with continent, gross national income in 2008 and Human Development Index Score. The only exogenous risk factor consistently associated with higher incidence was the penetration rate of mobile/cellular telecommunications subscriptions, although other factors were highlighted. According to these ecological results the latency period is at least 11-12 years, but probably more than 20 years. Missing data on cancer incidence and for other potential risk factors prohibit more detailed investigation of exposure-response associations and/or explore other hypotheses. **CONCLUSIONS:** Readily available ecological data may be underused, particularly for the study of risk factors for rare diseases and those with long latencies. The results of ecological analyses in general should not be overinterpreted in causal inference, but equally they should not be ignored where alternative signals of aetiology are lacking.

Czyz J, GuanK, ZengQ, NikolovaT, MeisterA, SchönbornF, SchudererJ, KusterN, WobusAM, High frequency electromagnetic fields (GSM signals) affect gene expression levels in tumor suppressor p53-deficient embryonic stem cells. Bioelectromagnetics 25:296-307, 2004.

Effects of electromagnetic fields (EMF) simulating exposure to the Global System for Mobile Communications (GSM) signals were studied using pluripotent embryonic stem (ES) cells in vitro. Wild-type ES cells and ES cells deficient for the tumor suppressor p53 were exposed to pulse modulated EMF at 1.71 GHz, lower end of the uplink band of GSM 1800, under standardized and controlled conditions, and transcripts of regulatory genes were analyzed during in vitro differentiation. Two dominant GSM modulation schemes (GSM-217 and GSM-Talk), which generate temporal changes between GSM-Basic (active during talking phases) and GSM-DTX (active during listening phases thus simulating a typical conversation), were applied to the cells at and below the basic safety limits for local exposures as defined for the general public by the International Commission on Nonionizing Radiation Protection (ICNIRP). GSM-217 EMF induced a significant upregulation of mRNA levels of the heat shock protein, hsp70 of p53-deficient ES cells differentiating in vitro, paralleled by a low and transient increase of c-jun, c-myc, and p21 levels in p53-deficient, but not in wild-type cells. No responses were observed in either cell type after EMF exposure to GSM-Talk applied at similar slot-averaged specific absorption rates (SAR), but at lower time-averaged SAR values. Cardiac differentiation and cell cycle characteristics were not affected in embryonic stem and embryonic carcinoma cells after exposure to GSM-217 EMF signals. Our data indicate that the genetic background determines cellular responses to GSM modulated EMF.

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Brautbar N. Rapid development of brain tumors in 2 cellular phone testers. Arch Environ Health. 58(9):606, 2003.

Two case reports. Comment on [Richter ED, Berman T, Levy O. Brain cancer with induction periods of less than 10 years in young military radar workers. Arch Environ Health. 2002 Jul-Aug;57(4):270-272.]

Auvinen A, Hietanen M, Luukkonen R, Koskela R-S, Brain tumors and salivary gland cancers among cellular telephone users Epidemiology 13:356-359, 2002.

Background. Possible risk of cancer associated with use of cellular telephones has lately been a subject of public debate. Methods. We conducted a register-based, case-control study on cellular phone use and cancer. The study subjects were all cases of brain tumor (N = 398) and salivary gland cancer (N = 34) diagnosed in Finland in 1996, with five controls per case. Results. Cellular phone use was not associated with brain tumors or salivary gland cancers overall, but there was a weak association between gliomas and analog cellular phones. Conclusions. A register-based approach has limited value in risk assessment of cellular phone use owing to lack of information on exposure.

Berg G, Spallek J, Schuz J, Schlehofer B, Bohler E, Schlaefer K, Hettinger I, Kunna-Grass K, Wahrendorf J, Blettner M. Occupational exposure to radio frequency/microwave radiation and the risk of brain tumors: Interphone Study Group, Germany. Am J Epidemiol.164(6):538-548, 2006.

It is still under debate whether occupational exposure to radio frequency/microwave electromagnetic fields (RF/MW-EMF) contributes to the development of brain tumors. This analysis examined the role of occupational RF/MW-EMF exposure in the risk of glioma and meningioma. A population-based, case-control study including 381 meningioma cases, 366 glioma cases, and 1,494 controls aged 30-69 years was performed in three German regions in 2000-2003. An exposure matrix for occupational activity was constructed by using information on RF/MW-EMF exposure collected in a computer-assisted personal interview. "High" exposure was defined as an occupational exposure that may exceed the RF/MW-EMF exposure limits for the general public recommended by the International Commission on Non-Ionizing Radiation Protection. Multiple conditional logistic regressions were performed separately for glioma and meningioma. No significant association between occupational exposure to RF/MW-EMF and brain tumors was found. For glioma, the adjusted odds ratio for highly exposed persons compared with persons not highly exposed was 1.21 (95% confidence interval: 0.69, 2.13); for meningioma, it was 1.34 (95% confidence interval: 0.64, 2.81). However, the slight increase in risk observed with increasing duration of exposure merits further research with larger sample sizes.

Caraglia M, Marra M, Mancinelli F, D'Ambrosio G, Massa R, Giordano A, Budillon A, Abbruzzese A, Bismuto E. Electromagnetic fields at mobile phone frequency induce apoptosis and inactivation of the multi-chaperone complex in human epidermoid cancer cells. J Cell Physiol. 204(2):539-548, 2005.

The exposure to non-thermal microwave electromagnetic field (MW-EMF) at 1.95 MHz,

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a frequency used in mobile communication, affects the refolding kinetics of eukaryotic proteins (Mancinelli et al., 2004). On these basis we have evaluated the in vivo effect of MW-EMF in human epidermoid cancer KB cells. We have found that MW-EMF induces time-dependent apoptosis (45% after 3 h) that is paralleled by an about 2.5-fold decrease of the expression of ras and Raf-1 and of the activity of ras and Erk-1/2. Although also the expression of Akt was reduced its activity was unchanged likely as a consequence of the increased expression of its upstream activator PI3K. In the same experimental conditions an about 2.5-fold increase of the ubiquitination of ras and Raf-1 was also found and the addition for 12 h of proteasome inhibitor lactacystin at 10 microM caused an accumulation of the ubiquitinated isoforms of ras and Raf-1 and counteracted the effects of MW-EMF on ras and Raf-1 expression suggesting an increased proteasome-dependent degradation induced by MW-EMF. The exposure of KB cells to MW-EMF induced a differential activation of stress-dependent pathway with an increase of JNK-1 activity and HSP70 and 27 expression and with a reduction of p38 kinase activity and HSP90 expression. The overexpression of HSP90 induced by transfection of KB cells with a plasmid encoding for the factor completely antagonized the apoptosis and the inactivation of the ras --> Erk-dependent survival signal induced by MW-EMF. Conversely, the inhibition of Erk activity induced by 12 h exposure to 10 mM Mek-1 inhibitor U0126 antagonized the effects induced by HSP90 transfection on apoptosis caused by MW-EMF. In conclusion, these results demonstrate for the first time that MW-EMF induces apoptosis through the inactivation of the ras --> Erk survival signaling due to enhanced degradation of ras and Raf-1 determined by decreased expression of HSP90 and the consequent increase of proteasome dependent degradation.

Heikkinen P, Kosma VM, Alhonen L, Huuskonen H, Komulainen H, Kumlin T, Laitinen JT, Lang S, Puranen L, Juutilainen J. Effects of mobile phone radiation on UV-induced skin tumourigenesis in ornithine decarboxylase transgenic and non-transgenic mice. *Int J Radiat Biol* 79(4):221-233, 2003.

Purpose: The effects of low-level radiofrequency radiation (RFR) on ultraviolet (UV)-induced skin tumorigenesis were evaluated in ornithine decarboxylase (ODC) and non-transgenic mice. Materials and methods: Transgenic female mice over-expressing the human ODC gene and their non-transgenic littermates (20 animals in the cage control group, and 45-49 animals in the other groups) were exposed for 52 weeks to UV radiation or a combination of UV radiation and pulsed RFR. The UV dose was 240 Jm(-2) (1.2 x human minimum erythral dose) delivered three times a week. One group of animals was exposed to Digital Advanced Mobile Phone System (DAMPS)-type RFR, the other group to Global System for Mobile (GSM)-type RFR at a nominal average specific absorption rate of 0.5 W kg(-1), 1.5 h day(-1), for 5 days a week. The skin was carefully palpated weekly for macroscopic tumours. Histopathological analyses of all skin lesions and of a specified dorsal skin area were performed on all animals. Results: UV exposure resulted in development of macroscopic skin tumours in 11.5 and 36.8% of non-transgenic and transgenic animals, respectively. The RFR exposures did not give a statistically significant effect on the development of skin tumours in either transgenic or

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non-transgenic animals, or in combined analysis, but tumour development appeared slightly accelerated especially in non-transgenic animals. No effects of RFR exposures were found on excretion of 6-hydroxymelatonin sulphate into urine or on polyamine levels in dorsal skin. Conclusion: RFR exposures did not significantly enhance skin tumourigenesis. However, the slightly accelerated tumour development may warrant further evaluation.

DNA Damage

Franzellitti S, Valbonesi P, Ciancaglini N, Biondi C, Contin A, Bersani F, Fabbri E. Transient DNA damage induced by high-frequency electromagnetic fields (GSM 1.8 GHz) in the human trophoblast HTR-8/SVneo cell line evaluated with the alkaline comet assay. *Mutat Res.* 683(1-2):35-42, 2010.

One of the most controversial issue regarding high-frequency electromagnetic fields (HF-EMF) is their putative capacity to affect DNA integrity. This is of particular concern due to the increasing use of HF-EMF in communication technologies, including mobile phones. Although epidemiological studies report no detrimental effects on human health, the possible disturbance generated by HF-EMF on cell physiology remains controversial. In addition, the question remains as to whether cells are able to compensate their potential effects. We have previously reported that a 1-h exposure to amplitude-modulated 1.8 GHz sinusoidal waves (GSM-217 Hz, SAR=2 W/kg) largely used in mobile telephony did not cause increased levels of primary DNA damage in human trophoblast HTR-8/SVneo cells. Nevertheless, further investigations on trophoblast cell responses after exposure to GSM signals of different types and durations were considered of interest. In the present work, HTR-8/SVneo cells were exposed for 4, 16 or 24h to 1.8 GHz continuous wave (CW) and different GSM signals, namely GSM-217 Hz and GSM-Talk (intermittent exposure: 5 min field on, 10 min field off). The alkaline comet assay was used to evaluate primary DNA damages and/or strand breaks due to uncompleted repair processes in HF-EMF exposed samples. The amplitude-modulated signals GSM-217 Hz and GSM-Talk induced a significant increase in comet parameters in trophoblast cells after 16 and 24h of exposure, while the un-modulated CW was ineffective. However, alterations were rapidly recovered and the DNA integrity of HF-EMF exposed cells was similar to that of sham-exposed cells within 2h of recovery in the absence irradiation. Our data suggest that HF-EMF with a carrier frequency and modulation scheme typical of the GSM signal may affect the DNA integrity.

Hekmat A, Saboury AA, Moosavi-Movahedi AA. The toxic effects of mobile phone radiofrequency (940MHz) on the structure of calf thymus DNA. *Ecotoxicol Environ Saf.* 2012 Nov 16. pii: S0147-6513(12)00368-5. doi: 10.1016/j.ecoenv.2012.10.016. [Epub ahead of print]

Currently, the biological effects of nonionizing electromagnetic fields (EMFs) including radiofrequency (RF) radiation have been the subject of numerous experimental and theoretical studies. The aim of this study is to evaluate the possible biological effects of

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mobile phone RF (940MHz, 15V/m and SAR=40mW/kg) on the structure of calf thymus DNA (ct DNA) immediately after exposure and 2h after 45min exposure via diverse range of spectroscopic instruments. The UV-vis and circular dichroism (CD) experiments depict that mobile phone EMFs can remarkably cause disturbance on ct DNA structure. In addition, the DNA samples, immediately after exposure and 2h after 45min exposure, are relatively thermally unstable compared to the DNA solution, which was placed in a small shielded box (unexposed ct DNA). Furthermore, the exposed DNA samples (the DNA samples that were exposed to 940MHz EMF) have more fluorescence emission when compared with the unexposed DNA, which may have occurred attributable to expansion of the exposed DNA structure. The results of dynamic light scattering (DLS) and zeta potential experiments demonstrate that RF-EMFs lead to increment in the surface charge and size of DNA. The structure of DNA immediately after exposure is not significantly different from the DNA sample 2h after 45min exposure. In other words, the EMF-induced conformational changes are irreversible. Collectively, our results reveal that 940MHz can alter the structure of DNA. The displacement of electrons in DNA by EMFs may lead to conformational changes of DNA and DNA disaggregation. Results from this study could have an important implication on the health effects of RF-EMFs exposure. In addition, this finding could proffer a novel strategy for the development of next generation of mobile phone.

Sekeroğlu V, Akar A, Sekeroğlu ZA. Cytotoxic and genotoxic effects of high-frequency electromagnetic fields (GSM 1800 MHz) on immature and mature rats. *Ecotoxicol Environ Saf.* 80:140-144, 2012.

We investigated the cytogenotoxic effects of high frequency electromagnetic fields (HF-EMF) for 45 day and the effect of a recovery period of 15 day after exposure to EMF on bone marrow cells of immature and mature rats. The animals in treatment groups were exposed to 1800 MHz EMF at SAR of 0.37 W/kg and 0.49 W/kg for 2h/day for 45 day. Two recovery groups were kept for a recovery period of 15 day without EMF after exposure to HF-EMF. Two control groups for both immature and mature rats were also included. Significant differences were also observed in chromosome aberrations (CA), micronucleus (MN) frequency, mitotic index (MI) and ratio of polychromatic erythrocytes (PCEs) in all treatment groups. The cytogenotoxic damage was more remarkable in immature rats and, the recovery period did not improve this damage in immature rats. Because much higher and irreversible cytogenotoxic damage was observed in immature rats than in mature rats, further studies are needed to understand effects of EMF on DNA damage and DNA repair, and to determine safe limits for environment and human, especially for children.

Tomruk A, Guler G, Dincel AS. The influence of 1800 MHz GSM-like signals on hepatic oxidative DNA and lipid damage in nonpregnant, pregnant, and newly born rabbits. *Cell Biochem Biophys.* 56(1):39-47, 2010.

The aim of our study is to evaluate the possible biological effects of whole-body 1800 MHz GSM-like radiofrequency (RF) radiation exposure on liver oxidative DNA damage and lipid peroxidation levels in nonpregnant, pregnant New Zealand White rabbits, and

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in their newly borns. Eighteen nonpregnant and pregnant rabbits were used and randomly divided into four groups which were composed of nine rabbits: (i) Group I (nonpregnant control), (ii) Group II (nonpregnant-RF exposed), (iii) Group III (pregnant control), (iv) Group IV (pregnant-RF exposed). Newborns of the pregnant rabbits were also divided into two groups: (v) Group V (newborns of Group III) and (vi) Group VI (newborns of Group III). 1800 MHz GSM-like RF radiation whole-body exposure (15 min/day for a week) was applied to Group II and Group IV. No significant differences were found in liver 8 OHdG/10(6) dG levels of exposure groups (Group II and Group IV) compared to controls (Group I and Group III). However, in Group II and Group IV malondialdehyde (MDA) and ferrous oxidation in xylenol orange (FOX) levels were increased compared to Group I ($P < 0.05$, Mann-Whitney). No significant differences were found in liver tissue of 8 OHdG/10(6) dG and MDA levels between Group VI and Group V ($P > 0.05$, Mann-Whitney) while liver FOX levels were found significantly increased in Group VI with respect to Group V ($P < 0.05$, Mann-Whitney). Consequently, the whole-body 1800 MHz GSM-like RF radiation exposure may lead to oxidative destruction as being indicators of subsequent reactions that occur to form oxygen toxicity in tissues.

Schwarz C, Kratochvil E, Pilger A, Kuster N, Adlkofer F, Rüdiger HW. Radiofrequency electromagnetic fields (UMTS, 1,950 MHz) induce genotoxic effects in vitro in human fibroblasts but not in lymphocytes. *Int Arch Occup Environ Health*. 81(6):755-767, 2008.

OBJECTIVE: Universal Mobile Telecommunication System (UMTS) was recently introduced as the third generation mobile communication standard in Europe. This was done without any information on biological effects and genotoxic properties of these particular high-frequency electromagnetic fields. This is disconcerting, because genotoxic effects of the second generation standard Global System for Mobile Communication have been reported after exposure of human cells in vitro. **METHODS:** Human cultured fibroblasts of three different donors and three different short-term human lymphocyte cultures were exposed to 1,950 MHz UMTS below the specific absorption rate (SAR) safety limit of 2 W/kg. The alkaline comet assay and the micronucleus assay were used to ascertain dose and time-dependent genotoxic effects. Five hundred cells per slide were visually evaluated in the comet assay and comet tail factor (CTF) was calculated. In the micronucleus assay 1,000 binucleated cells were evaluated per assay. The origin of the micronuclei was determined by fluorescence labeled anticentromere antibodies. All evaluations were performed under blinded conditions. **RESULTS:** UMTS exposure increased the CTF and induced centromere-negative micronuclei (MN) in human cultured fibroblasts in a dose and time-dependent way. Incubation for 24 h at a SAR of 0.05 W/kg generated a statistically significant rise in both CTF and MN ($P = 0.02$). At a SAR of 0.1 W/kg the CTF was significantly increased after 8 h of incubation ($P = 0.02$), the number of MN after 12 h ($P = 0.02$). No UMTS effect was obtained with lymphocytes, either unstimulated or stimulated with Phytohemagglutinin. **CONCLUSION:** UMTS exposure may cause genetic alterations in some but not in all human cells in vitro.

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Pesnya DS, Romanovsky AV. Comparison of cytotoxic and genotoxic effects of plutonium-239 alpha particles and mobile phone GSM 900 radiation in the Allium cepa test. *Mutat Res.* 2012 Oct 8. pii: S1383-5718(12)00291-4. doi: 10.1016/j.mrgentox.2012.08.010. [Epub ahead of print]

The goal of this study was to compare the cytotoxic and genotoxic effects of plutonium-239 alpha particles and GSM 900 modulated mobile phone (model Sony Ericsson K550i) radiation in the Allium cepa test. Three groups of bulbs were exposed to mobile phone radiation during 0 (sham), 3 and 9h. A positive control group was treated during 20min with plutonium-239 alpha-radiation. Mitotic abnormalities, chromosome aberrations, micronuclei and mitotic index were analyzed. Exposure to alpha-radiation from plutonium-239 and exposure to modulated radiation from mobile phone during 3 and 9h significantly increased the mitotic index. GSM 900 mobile phone radiation as well as alpha-radiation from plutonium-239 induced both clastogenic and aneugenic effects. However, the aneugenic activity of mobile phone radiation was more pronounced. After 9h of exposure to mobile phone radiation, polyploid cells, three-groups metaphases, amitoses and some unspecified abnormalities were detected, which were not registered in the other experimental groups. Importantly, GSM 900 mobile phone radiation increased the mitotic index, the frequency of mitotic and chromosome abnormalities, and the micronucleus frequency in a time-dependent manner. Due to its sensitivity, the A. cepa test can be recommended as a useful cytogenetic assay to assess cytotoxic and genotoxic effects of radiofrequency electromagnetic fields.

Zhijian C, Xiaoxue L, Wei Z, Yezhen L, Jianlin L, Deqiang L, Shijie C, Lifan J, Jiliang H. Studying the protein expression in human B lymphoblastoid cells exposed to 1.8-GHz (GSM) radiofrequency radiation (RFR) with protein microarray. *Biochem Biophys Res Commun.* 433(1):36-39, 2013.

In the present study, the protein microarray was used to investigate the protein expression in human B-cell lymphoblastoid cells intermittently exposed to 1.8-GHz GSM radiofrequency radiation (RFR) at the specific absorption rate (SAR) of 2.0W/kg for 24h. The differential expression of 27 proteins was found, which were related to DNA damage repair, apoptosis, oncogenesis, cell cycle and proliferation (ratio >1.5-fold, P<0.05). The results validated with Western blot assay indicated that the expression of RPA32 was significantly down-regulated (P<0.05) while the expression of p73 was significantly up-regulated in RFR exposure group (P<0.05). Because of the crucial roles of those proteins in DNA repair and cell apoptosis, the results of present investigation may explain the biological effects of RFR on DNA damage/repair and cell apoptosis.

Souza LD, Cerqueira ED, Meireles JR. Assessment of nuclear abnormalities in exfoliated cells from the oral epithelium of mobile phone users. *Electromagn Biol Med.* 2013 May 28. [Epub ahead of print]

Transmission and reception of mobile telephony signals take place through electromagnetic wave radiation, or electromagnetic radiofrequency fields, between the mobile terminal and the radio base station. Based on reports in the literature on

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adverse effects from exposure to this type of radiation, the objective of this study was to evaluate the genotoxic and cytotoxic potential of such exposure, by means of the micronucleus test on exfoliated cells from the oral epithelium. The sample included 45 individuals distributed in 3 groups according to the amount of time in hours per week (t) spent using mobile phones: group I, $t > 5$ h; group II, $t > 1$ h and ≤ 5 h; and group III, $t \leq 1$ h. Cells from the oral mucosa were analyzed to assess the numbers of micronuclei, broken egg structures and degenerative nuclear abnormalities indicative of apoptosis (condensed chromatin, karyorrhexis and pyknosis) or necrosis (karyolysis in addition to these changes). The occurrences of micronuclei and degenerative nuclear abnormalities did not differ between the groups, but the number of broken egg (structures that may be associated with gene amplification) was significantly greater in the individuals in group I ($p < 0.05$).

Esmekaya MA, Aytekin E, Ozgur E, Güler G, Ergun MA, Omeroğlu S, Seyhan N. Mutagenic and morphologic impacts of 1.8GHz radiofrequency radiation on human peripheral blood lymphocytes (hPBLs) and possible protective role of pre-treatment with Ginkgo biloba (EGb 761). Sci Total Environ. 410-411:59-64, 2011.

The mutagenic and morphologic effects of 1.8GHz Global System for Mobile Communications (GSM) modulated RF (radiofrequency) radiation alone and in combination with Ginkgo biloba (EGb 761) pre-treatment in human peripheral blood lymphocytes (hPBLs) were investigated in this study using Sister Chromatid Exchange (SCE) and electron microscopy. Cell viability was assessed with 3-(4, 5-dimethylthiazol-2-yl)-2, 5-diphenyltetrazolium bromide (MTT) reduction assay. The lymphocyte cultures were exposed to GSM modulated RF radiation at 1.8GHz for 6, 8, 24 and 48h with and without EGb 761. We observed morphological changes in pulse-modulated RF radiated lymphocytes. Longer exposure periods led to destruction of organelle and nucleus structures. Chromatin change and the loss of mitochondrial crista occurred in cells exposed to RF for 8h and 24h and were more pronounced in cells exposed for 48h. Cytoplasmic lysis and destruction of membrane integrity of cells and nuclei were also seen in 48h RF exposed cells. There was a significant increase ($p < 0.05$) in SCE frequency in RF exposed lymphocytes compared to sham controls. EGb 761 pre-treatment significantly decreased SCE from RF radiation. RF radiation also inhibited cell viability in a time dependent manner. The inhibitory effects of RF radiation on the growth of lymphocytes were marked in longer exposure periods. EGb 761 pre-treatment significantly increased cell viability in RF+EGb 761 treated groups at 8 and 24h when compared to RF exposed groups alone. The results of our study showed that RF radiation affects cell morphology, increases SCE and inhibits cell proliferation. However, EGb 761 has a protective role against RF induced mutagenity. We concluded that RF radiation induces chromosomal damage in hPBLs but this damage may be reduced by EGb 761 pre-treatment.

Diem E, Schwarz C, Adlkofer F, Jahn O, Rudiger H. Non-thermal DNA breakage by mobile-phone radiation (1800MHz) in human fibroblasts and in transformed GFSH-R17 rat granulosa cells in vitro. Mutat Res. 583:178-183, 2005.

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Cultured human diploid fibroblasts and cultured rat granulosa cells were exposed to intermittent and continuous radiofrequency electromagnetic fields (RF-EMF) used in mobile phones, with different specific absorption rates (SAR) and different mobile-phone modulations. DNA strand breaks were determined by means of the alkaline and neutral comet assay. RF-EMF exposure (1800MHz; SAR 1.2 or 2W/kg; different modulations; during 4, 16 and 24h; intermittent 5min on/10min off or continuous wave) induced DNA single- and double-strand breaks. Effects occurred after 16h exposure in both cell types and after different mobile-phone modulations. The intermittent exposure showed a stronger effect in the comet assay than continuous exposure. Therefore we conclude that the induced DNA damage cannot be based on thermal effects.

Yao K, Wu W, Wang K, Ni S, Ye P, Yu Y, Ye J, Sun L. Electromagnetic noise inhibits radiofrequency radiation-induced DNA damage and reactive oxygen species increase in human lens epithelial cells. Mol Vis. 14:964-969, 2008.

PURPOSE: The goal of this study was to investigate whether superposing of electromagnetic noise could block or attenuate DNA damage and intracellular **reactive oxygen species (ROS)** increase of cultured human lens epithelial cells (HLECs) induced by acute exposure to 1.8 GHz radiofrequency field (RF) of the Global System for Mobile Communications (GSM). METHODS: An sXc-1800 RF exposure system was used to produce a GSM signal at 1.8 GHz (217 Hz amplitude-modulated) with the specific absorption rate (SAR) of 1, 2, 3, and 4 W/kg. After 2 h of intermittent exposure, the ROS level was assessed by the fluorescent probe, 2',7'-dichlorodihydrofluorescein diacetate (DCFH-DA). DNA damage to HLECs was examined by alkaline comet assay and the phosphorylated form of histone variant H2AX (gammaH2AX) foci formation assay. RESULTS: After exposure to 1.8 GHz RF for 2 h, HLECs exhibited significant intracellular ROS increase in the 2, 3, and 4 W/kg groups. RF radiation at the SAR of 3 W/kg and 4 W/kg could induce significant DNA damage, examined by alkaline comet assay, which was used to detect mainly **single strand breaks (SSBs)**, while no statistical difference in double strand breaks (DSBs), evaluated by gammaH2AX foci, was found between RF exposure (SAR: 3 and 4 W/kg) and sham exposure groups. When RF was superposed with 2 muT electromagnetic noise could block RF-induced ROS increase and DNA damage. CONCLUSIONS: DNA damage induced by 1.8 GHz radiofrequency field for 2 h, which was mainly SSBs, may be associated with the increased ROS production. Electromagnetic noise could block RF-induced ROS formation and DNA damage.

Zhang SZ, Yao GD, Lu DQ, Chiang H, Xu ZP. [Effect of 1.8 GHz radiofrequencyelectromagnetic fields on gene expression of rat neurons]. Zhonghua Lao Dong Wei Sheng Zhi Ye Bing Za Zhi. 26(8):449-452, 2008. [Article in Chinese]

OBJECTIVE: To investigate the changes of gene expression in rat neuron induced by 1.8 GHz radiofrequencyelectromagnetic fields (RF EMF) to screen for RF EMF-responsive genes and the effect of different exposure times and modes on the gene expression in neuron. METHODS: Total RNA was extracted immediately and purified from the primary culture of neurons after intermittent exposed or sham-exposed to a frequency of 1.8

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GHz RF EMF for 24 hours at an average special absorption rate (SAR) of 2 W/kg. Affymetrix Rat Neurobiology U34 array was applied to investigate the changes of gene expression in rat neuron. Differentially expressed genes (Egr-1, Mbp and Plp) were further confirmed by semi-quantitative reverse transcription polymerase chain reaction (RT PCR). The expression levels of Egr-1, Mbp and Plp were observed at different exposure times (6, 24 h) and modes (intermittent and continuous exposure). RESULTS: Among 1200 candidate genes, 24 up-regulated and 10 down-regulated genes were found by using Affymetrix microarray suite software 5.0 which are associated with multiple cellular functions (cytoskeleton, signal transduction pathway, metabolism, etc.) after functional classification. Under 24 h and 6 h intermittent exposure, Egr-1 and Plp in experiment groups showed statistic significance ($P < 0.05$) compared with the control groups, while expression of Mbp did not change significantly ($P > 0.05$). After 24 h continuous exposure, Egr-1 and Mbp in experiment groups showed statistic significance ($P < 0.05$) compared with the control group, while expression of Plp did not change significantly ($P > 0.05$). Under the same exposure mode 6 h, expression of all the 3 genes did not change significantly. Different times (6, 24 h) and modes (intermittent and continuous exposure) of exposure exerted remarkable different influences on the expression of Egr-1, Mbp, Plp genes ($P < 0.01$). CONCLUSION: The changes of many genes transcription were involved in the effect of 1.8 GHz RF EMF on rat neurons; Down-regulation of Egr-1 and up-regulation of Mbp, Plp indicated the negative effects of RF EMF on neurons; The effect of RF intermittent exposure on gene expression was more obvious than that of continuous exposure; The effect of 24 h RF exposure (both intermittent and continuous) on gene expression was more obvious than that of 6 h (both intermittent and continuous).

Zhao R, Zhang S, Xu Z, Ju L, Lu D, Yao G. Studying gene expression profile of rat neuron exposed to 1800MHz radiofrequency electromagnetic fields with cDNA microassay. *Toxicology*. 235(3):167-175, 2007.

A widespread use of mobile phone (MP) evokes a growing concern for their possible adverse effects on human, especially the brain. Gene expression is a unique way of characterizing how cells and organism adapt to changes in the external environment, so the aim of this investigation was to determine whether 1800 MHz radiofrequency electromagnetic fields (RF EMF) can influence the gene expression of neuron. Affymetrix Rat Neurobiology U34 array was applied to investigate the changes of gene expression in rat neuron after exposed to the pulsed RF EMF at a frequency of 1800 MHz modulated by 217 Hz which is commonly used in MP. Among 1200 candidate genes, 24 up-regulated genes and 10 down-regulated genes were identified after 24-h intermittent exposure at an average special absorption rate (SAR) of 2 W/kg, which are associated with multiple cellular functions (cytoskeleton, signal transduction pathway, metabolism, etc.) after functional classification. The results were further confirmed by quantitative real-time polymerase chain reaction (RT PCR). The present results indicated that the gene expression of rat neuron could be altered by exposure to RF EMF under our experimental conditions.

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Prohofsky EW. RF absorption involving biological macromolecules.

Bioelectromagnetics. 25(6):441-451, 2004.

The fundamental intramolecular frequency of a globular protein can be obtained from the measurements of acoustic velocities of bulk protein matter. This lowest frequency for common size molecules is shown to be above several hundred GHz. All modes below this frequency would then be intermolecular modes or bulk modes of the molecule and surrounding matter or tissue. The lowest frequency modes of an extended DNA double helix are also shown to be bulk modes because of interaction with water. Only DNA modes, whose frequency is well above 4 GHz, can be intrahelical modes, that is, confined to the helix rather than in the helix plus surroundings. Near 4 GHz, they are heavily damped and, therefore, not able to resonantly absorb. Modes that absorb radio frequency (RF) below this frequency are bulk modes of the supporting matter. Bulk modes rapidly thermalize all absorbed energy. The implication of these findings for the possibility of athermal RF effects is considered. The applicability of these findings for other biological molecules is discussed.

Cam ST, Seyhan N. Single-strand DNA breaks in human hair root cells exposed to mobile phone radiation. Int J Radiat Biol.88(5):420-424, 2012.

Abstract. Purpose: To analyze the short term effects of radiofrequency radiation (RFR) exposure on genomic deoxyribonucleic acid (DNA) of human hair root cells. Subjects and methods: Hair samples were collected from 8 healthy human subjects immediately before and after using a 900-MHz GSM (Global System for Mobile Communications) mobile phone for 15 and 30 minutes. Single-strand DNA breaks of hair root cells from the samples were determined using the 'comet assay'. Results: The data showed that talking on a mobile phone for 15 or 30 minutes significantly increased ($p < .05$) single-strand DNA breaks in cells of hair roots close to the phone. Comparing the 15-min and 30-min data using the paired t-test also showed that significantly more damages resulted after 30 minutes than after 15 minutes of phone use. Conclusions: A short-term exposure (15 and 30 minutes) to RFR (900-MHz) from a mobile phone caused a significant increase in DNA single-strand breaks in human hair root cells located around the ear which is used for the phone calls.

Campisi A, Gulino M, Acquaviva R, Bellia P, Raciti G, Grasso R, Musumeci F, Vanella A, Triglia A. Reactive oxygen species levels and DNA fragmentation on astrocytes in primary culture after acute exposure to low intensity microwave electromagnetic field. Neurosci Lett.31 473(1):52-55, 2010.

The exposure of primary rat neocortical astroglial cell cultures to acute electromagnetic fields (EMF) in the microwave range was studied. Differentiated astroglial cell cultures at 14 days in vitro were exposed for 5, 10, or 20min to either 900MHz continuous waves or 900MHz waves modulated in amplitude at 50Hz using a sinusoidal waveform and 100% modulation index. The strength of the electric field (rms value) at the sample position was 10V/m. No change in cellular viability evaluated by MTT test and lactate dehydrogenase release was observed. A significant increase in ROS levels and DNA fragmentation was found only after exposure of the astrocytes to modulated EMF for

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20min. No evident effects were detected when shorter time intervals or continuous waves were used. The irradiation conditions allowed the exclusion of any possible thermal effect. Our data demonstrate, for the first time, that even acute exposure to low intensity EMF induces ROS production and DNA fragmentation in astrocytes in primary cultures, which also represent the principal target of modulated EMF. Our findings also suggest the hypothesis that the effects could be due to hyperstimulation of the glutamate receptors, which play a crucial role in acute and chronic brain damage. Furthermore, the results show the importance of the amplitude modulation in the interaction between EMF and neocortical astrocytes.

Gandhi G, Anita Genetic damage in mobile phone users: some preliminary findings. Ind J Hum Genet 11(2): 99-104, 2005.

BACKGROUND: The impact of microwave (MW)/radio frequency radiation (RFR) on important biological parameters is probably more than a simply thermal one. Exposure to radio frequency (RF) signals generated by the use of cellular telephones have increased dramatically and reported to affect physiological, neurological, cognitive and behavioural changes and to induce, initiate and promote carcinogenesis. Genotoxicity of RFR has also been reported in various test systems after in vitro and/or in vivo exposure but none in mobile phone users. **AIMS:** In the present study, DNA and chromosomal damage investigations were carried out on the peripheral blood lymphocytes of individuals using mobile phones, being exposed to MW frequency ranging from 800 to 2000 MHz. **METHODS:** DNA damage was assessed using the single cell gel electrophoresis assay and aneugenic and clastogenic damage by the in vivo capillary blood micronucleus test (MNT) in a total of 24 mobile phone users. **RESULTS:** Mean comet tail length (26.76 ± 0.054 mm; 39.75% of cells damaged) in mobile phone users was highly significant from that in the control group. The in vivo capillary blood MNT also revealed highly significant (0.25) frequency of micronucleated (MNd) cells. **CONCLUSIONS:** These results highlight a correlation between mobile phone use (exposure to RFR) and genetic damage and require interim public health actions in the wake of widespread use of mobile telephony.

Franzellitti S, Valbonesi P, Ciancaglini N, Biondi C, Contin A, Bersani F, Fabbri E. Transient DNA damage induced by high-frequency electromagnetic fields (GSM 1.8 GHz) in the human trophoblast HTR-8/SVneo cell line evaluated with the alkaline comet assay. Mutat Res. 683(1-2):35-42, 2010.

One of the most controversial issue regarding high-frequency electromagnetic fields (HF-EMF) is their putative capacity to affect DNA integrity. This is of particular concern due to the increasing use of HF-EMF in communication technologies, including mobile phones. Although epidemiological studies report no detrimental effects on human health, the possible disturbance generated by HF-EMF on cell physiology remains controversial. In addition, the question remains as to whether cells are able to compensate their potential effects. We have previously reported that a 1-h exposure to amplitude-modulated 1.8 GHz sinusoidal waves (GSM-217 Hz, SAR=2 W/kg) largely used in mobile telephony did not cause increased levels of primary DNA damage in human

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trophoblast HTR-8/SVneo cells. Nevertheless, further investigations on trophoblast cell responses after exposure to GSM signals of different types and durations were considered of interest. In the present work, HTR-8/SVneo cells were exposed for 4, 16 or 24h to 1.8 GHz continuous wave (CW) and different GSM signals, namely GSM-217 Hz and GSM-Talk (intermittent exposure: 5 min field on, 10 min field off). The alkaline comet assay was used to evaluate primary DNA damages and/or strand breaks due to uncompleted repair processes in HF-EMF exposed samples. The amplitude-modulated signals GSM-217 Hz and GSM-Talk induced a significant increase in comet parameters in trophoblast cells after 16 and 24h of exposure, while the un-modulated CW was ineffective. However, alterations were rapidly recovered and the DNA integrity of HF-EMF exposed cells was similar to that of sham-exposed cells within 2h of recovery in the absence irradiation. Our data suggest that HF-EMF with a carrier frequency and modulation scheme typical of the GSM signal may affect the DNA integrity.

Wu W, Yao K, Wang KJ, Lu DQ, He JL, Xu LH, Sun WJ. [Blocking 1800 MHz mobile phone radiation-induced reactive oxygen species production and DNA damage in lens epithelial cells by noise magnetic fields.] *Zhejiang Da Xue Xue Bao Yi Xue Ban.* 37(1):34-38, 2008. [Article in Chinese]

OBJECTIVE: To investigate whether the exposure to the electromagnetic noise can block reactive oxygen species (ROS) production and DNA damage of lens epithelial cells induced by 1800 MHz mobile phone radiation. **METHODS:** The DCFH-DA method and comet assay were used respectively to detect the intracellular ROS and DNA damage of cultured human lens epithelial cells induced by 4 W/kg 1800 MHz mobile phone radiation or/and 2microT electromagnetic noise for 24 h intermittently. **RESULT:** 1800 MHz mobile phone radiation at 4 W/kg for 24 h increased intracellular ROS and DNA damage significantly ($P<0.05$). However, the ROS level and DNA damage of mobile phone radiation plus noise group were not significant enhanced ($P>0.05$) as compared to sham exposure group. **Conclusion:** Electromagnetic noise can block intracellular ROS production and DNA damage of human lens epithelial cells induced by 1800 MHz mobile phone radiation.

Ji S, Oh E, Sul D, Choi JW, Park H, Lee E. DNA Damage of Lymphocytes in Volunteers after 4 hours Use of Mobile Phone. *J Prev Med Public Health.* 37(4):373-380, 2004.

OBJECTIVES: There has been gradually increasing concern about the adverse health effects of electromagnetic radiation originating from cell phones which are widely used in modern life. Cell phone radiation may affect human health by increasing free radicals of human blood cells. This study has been designed to identify DNA damage of blood cells by electromagnetic radiation caused by cell phone use. **METHODS:** This study investigated the health effect of acute exposure to commercially available cell phones on certain parameters such as an indicator of DNA damage for 14 healthy adult volunteers. Each volunteer during the experiment talked over the cell phone with the keypad facing the right side of the face for 4 hours. The single cell gel electrophoresis assay (Comet assay), which is very sensitive in detecting the presence of DNA strand-breaks and alkali-labile damage in individual cells, was used to assess peripheral blood

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cells (T-cells, B-cells, granulocytes) from volunteers before and after exposure to cell phone radiation. The parameters of Comet assay measured were Olive Tail Moment and Tail DNA %. **RESULTS:** The Olive Tail Moment of B-cells and granulocytes and Tail DNA % of B-cells and granulocytes were increased by a statistically significant extent after 4-hour use of a cell phone compared with controls. **CONCLUSIONS:** It is concluded that cell phone radiation caused the DNA damage during the 4 hours of experimental condition. Nonetheless, this study suggested that cell phone use may increase DNA damage by electromagnetic radiation and other contributing factors.

Buttiglione M, Roca L, Montemurno E, Vitiello F, Capozzi V, Cibelli G. Radiofrequency radiation (900 MHz) induces Egr-1 gene expression and affects cell-cycle control in human neuroblastoma cells. J Cell Physiol. 213(3):759-767, 2007.

Many environmental signals, including ionizing radiation and UV rays, induce activation of Egr-1 gene, thus affecting cell growth and apoptosis. The paucity and the controversial knowledge about the effect of electromagnetic fields (EMF) exposure of nerve cells prompted us to investigate the bioeffects of radiofrequency (RF) radiation on SH-SY5Y neuroblastoma cells. The effect of a modulated RF field of 900 MHz, generated by a wire patch cell (WPC) antenna exposure system on Egr-1 gene expression, was studied as a function of time. Short-term exposures induced a transient increase in Egr-1 mRNA level paralleled with activation of the MAPK subtypes ERK1/2 and SAPK/JNK. The effects of RF radiations on cell growth rate and apoptosis were also studied. Exposure to RF radiation had an anti-proliferative activity in SH-SY5Y cells with a significant effect observed at 24 h. RF radiation impaired cell cycle progression, reaching a significant G2-M arrest. In addition, the appearance of the sub-G1 peak, a hallmark of apoptosis, was highlighted after a 24-h exposure, together with a significant decrease in mRNA levels of Bcl-2 and survivin genes, both interfering with signaling between G2-M arrest and apoptosis. Our results provide evidence that exposure to a 900 MHz-modulated RF radiation affect both Egr-1 gene expression and cell regulatory functions, involving apoptosis inhibitors like Bcl-2 and survivin, thus providing important insights into a potentially broad mechanism for controlling in vitro cell viability.

Tice RR, Hook GG, Donner M, McRee DI, Guy AW. Genotoxicity of radiofrequency signals. I. Investigation of DNA damage and micronuclei induction in cultured human blood cells. Bioelectromagnetics 23:113-126, 2002.

As part of a comprehensive investigation of the potential genotoxicity of radiofrequency (RF) signals emitted by cellular telephones, in vitro studies evaluated the induction of DNA and chromosomal damage in human blood leukocytes and lymphocytes, respectively. The signals were voice modulated 837 MHz produced by an analog signal generator or by a time division multiple access (TDMA) cellular telephone, 837 MHz generated by a code division multiple access (CDMA) cellular telephone (not voice modulated), and voice modulated 1909.8 MHz generated by a global system of mobile communication (GSM)-type personal communication systems (PCS) cellular telephone. DNA damage (strand breaks/alkali labile sites) was assessed in leukocytes using the alkaline (pH>13) single cell gel electrophoresis (SCG) assay. Chromosomal damage was evaluated in lymphocytes mitogenically stimulated to divide

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postexposure using the cytochalasin B-binucleate cell micronucleus assay. Cells were exposed at $37\pm 1^{\circ}\text{C}$, for 3 or 24 h at average specific absorption rates (SARs) of 1.0-10.0 W/kg. Exposure for either 3 or 24 h did not induce a significant increase in DNA damage in leukocytes, nor did exposure for 3 h induce a significant increase in micronucleated cells among lymphocytes. However, exposure to each of the four RF signal technologies for 24 h at an average SAR of 5.0 or 10.0 W/kg resulted in a significant and reproducible increase in the frequency of micronucleated lymphocytes. The magnitude of the response (approximately four fold) was independent of the technology, the presence or absence of voice modulation, and the frequency (837 vs. 1909.8 MHz). This research demonstrates that, under extended exposure conditions, RF signals at an average SAR of at least 5.0 W/kg are capable of inducing chromosomal damage in human lymphocytes.

Fucic A, Garaj-Vrhovac V, Skara M, Dimitrovic B, X-rays, microwaves and vinyl chloride monomer: their clastogenic and aneugenic activity, using the micronucleus assay on human lymphocytes. *Mutat Res* 282(4):265-271, 1992.

Chromosome aberration assays, sister-chromatid exchange techniques and micronucleus assays are commonly used methods for biomonitoring genetic material damaged by chemical or physical agents. On the other hand, their aneugenic activity, which can lead to hypoploidy and may also be associated with carcinogenesis, has not been thoroughly investigated. In our study we chose the micronucleus assay with a new mathematical approach to separate clastogenic from aneugenic activity of three well-known mutagens (vinyl chloride monomer, X-rays and microwaves) on the genome of human somatic cells. The comparison of frequencies of size distribution of micronuclei in the lymphocytes of humans exposed to each of these three mutagens showed that X-rays and microwaves were preferentially clastogens while vinyl chloride monomer showed aneugenic activity as well. Microwaves possess some mutagenic characteristics typical of chemical mutagens.

Sun LX, Yao K, Jiang H, He JL, Lu DQ, Wang KJ, Li HW [DNA damage and repair induced by acute exposure of microwave from mobile phone on cultured human lens epithelial cells] *Zhonghua Yan Ke Za Zhi*. 42(12):1084-1088, 2006. [Article in Chinese]

OBJECTIVE: To investigate the effects of acute exposure of low-power 217 Hz modulated 1.8 GHz microwave radiation on the DNA damage of human lens epithelial cells (hLECs) and repair. METHODS: Cultured hLECs were exposed to 217 Hz modulated 1.8 GHz microwave radiation at SAR (specific absorption rate) of 1.0, 2.0, 3.00 and 4.0 W/kg for 2 hours in an sXc-1800 incubator and irradiate system, the DNA single strand breaks were detected with comet assay (single-cell gel electrophoresis) in sham-irradiated cells and irradiated cells incubated for varying periods: 0, 30 and 60 minutes after irradiation. Images of comets were digitized and analyzed using an Imagine-pro plus software, and the indexes used in this study were tail length (TL) and tail moment (TM). BrdU was added into the medium with additional one hour incubation after radiation, the cell proliferation rate was determined using a BrdU-kit. RESULTS: The difference of DNA-breaks between the exposure and sham exposure groups induced by 1.0 and 2.0 W/kg irradiation were not significant in each time points ($P > 0.05$); there were significant

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difference in both groups at the exposure dose of 3.0 and 4.0 W/kg immediately and at the time of 30 minutes after irradiation ($P < 0.01$); if the radiation exposure time was beyond one hour no differences were able to be detected in 3.0 W/kg group ($P > 0.05$) compared with control, but the evidence of significant DNA damage still existed in 4.0 W/kg group at the same time point. Cell proliferation rate had no significant difference when the application of SAR was ≤ 3.0 W/kg ($P > 0.05$), however the cell proliferation was decreased significantly at the dose of 4.0 W/kg irradiation ($P < 0.01$). **CONCLUSIONS:** No effective DNA damage was induced using comet assay after 2 hours irradiation of 1.8 GHz microwave on hLECs at the dose SAR ≤ 3.0 W/kg. 4.0 W/kg irradiation caused significantly DNA damage and inhibition of hLECs proliferation.

Zhao TY, Zou SP, Knapp PE Exposure to cell phone radiation up-regulates apoptosis genes in primary cultures of neurons and astrocytes. *Neurosci Lett.* 412(1):34-38, 2007.

The health effects of cell phone radiation exposure are a growing public concern. This study investigated whether expression of genes related to cell death pathways are dysregulated in primary cultured neurons and astrocytes by exposure to a working Global System for Mobile Communication (GSM) cell phone rated at a frequency of 1900MHz. Primary cultures were exposed to cell phone emissions for 2h. We used array analysis and real-time RT-PCR to show up-regulation of caspase-2, caspase-6 and Asc (apoptosis associated speck-like protein containing a card) gene expression in neurons and astrocytes. Up-regulation occurred in both "on" and "stand-by" modes in neurons, but only in "on" mode in astrocytes. Additionally, astrocytes showed up-regulation of the Bax gene. The effects are specific since up-regulation was not seen for other genes associated with apoptosis, such as caspase-9 in either neurons or astrocytes, or Bax in neurons. The results show that even relatively short-term exposure to cell phone radiofrequency emissions can up-regulate elements of apoptotic pathways in cells derived from the brain, and that neurons appear to be more sensitive to this effect than astrocytes.

Hou Q, Wang M, Wu S, Ma X, An G, Liu H, Xie F. Oxidative changes and apoptosis induced by 1800-MHz electromagnetic radiation in NIH/3T3 cells. *Electromagn Biol Med.* 2014 Mar 25. [Epub ahead of print]

To investigate the potential adverse effects of mobile phone radiation, we studied reactive oxygen species (ROS), DNA damage and apoptosis in mouse embryonic fibroblasts (NIH/3T3) after intermittent exposure (5 min on/10 min off, for various durations from 0.5 to 8 h) to an 1800-MHz GSM-talk mode electromagnetic radiation (EMR) at an average specific absorption rate of 2 W/kg. A 2',7'-dichlorofluorescein diacetate fluorescence probe was used to detect intracellular ROS levels, immunofluorescence was used to detect γ H2AX foci as a marker for DNA damage, and flow cytometry was used to measure apoptosis. Our results showed a significant increase in intracellular ROS levels after EMR exposure and it reached the highest level at an exposure time of 1 h ($p < 0.05$) followed by a slight decrease when the exposure continued for as long as 8 h. No significant effect on the number of γ H2AX was detected after EMR exposure. The percentage of late-apoptotic cells in the EMR-exposed group

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was significantly higher than that in the sham-exposed groups ($p < 0.05$). These results indicate that an 1800-MHz EMR enhances ROS formation and promotes apoptosis in NIH/3T3 cells.

Zhang DY, Xu ZP, Chiang H, Lu DQ, Zeng QL. [Effects of GSM 1800 MHz radiofrequency electromagnetic fields on DNA damage in Chinese hamster lung cells.] Zhonghua Yu Fang Yi Xue Za Zhi. 40(3):149-152, 2006. [Article in Chinese]

OBJECTIVE: To study the effects of GSM 1800 MHz radiofrequency electromagnetic fields (RF EMF) on DNA damage in Chinese hamster lung (CHL) cells. **METHODS:** The cells were intermittently exposed or sham-exposed to GSM 1800 MHz RF EMF (5 minutes on/10 minutes off) at a special absorption rate (SAR) of 3.0 W/kg for 1 hour or 24 hours. Meanwhile, cells exposed to 2-acetaminofluorene, a DNA damage agent, at a final concentration of 20 mg/L for 2 hours were used as positive control. After exposure, cells were fixed by using 4% paraformaldehyde and processed for phosphorylated form of H2AX (gammaH2AX) immunofluorescence measurement. The primary antibody used for immunofluorescence was mouse monoclonal antibody against gammaH2AX and the secondary antibody was fluorescein isothiocyanate (FITC)-conjugated goat anti-mouse IgG. Nuclei were counterstained with 4, 6-diamidino-2-phenylindole (DAPI). The gammaH2AX foci and nuclei were visualized with an Olympus AX70 fluorescent microscope. Image Pro-Plus software was used to count the gammaH2AX foci in each cell. For each exposure condition, at least 50 cells were selected to detect gammaH2AX foci. Cells were classified as positive when more than five foci were detected. The percentage of gammaH2AX foci positive cells was adopted as the index of DNA damage. **RESULTS:** The percentage of gammaH2AX foci positive cell of 1800 MHz RF EMF exposure for 24 hours ($37.9 \pm 8.6\%$) or 2-acetylaminofluorene exposure ($50.9 \pm 9.4\%$) was significantly higher compared with the sham-exposure ($28.0 \pm 8.4\%$). However, there was no significant difference between the sham-exposure and RF EMF exposure for 1 hour ($31.8 \pm 8.7\%$). **CONCLUSION:** 1800 MHz RF EMF (SAR, 3.0 W/kg) for 24 hours might induce DNA damage in CHL cells.

Zhao R, Zhang SZ, Yao GD, Lu DQ, Jiang H, Xu ZP.[Effect of 1.8 GHz radiofrequency electromagnetic fields on the expression of microtubule associated protein 2 in rat neurons]Zhonghua Lao Dong Wei Sheng Zhi Ye Bing Za Zhi. 24(4):222-225, 2006. [Article in Chinese]

OBJECTIVE: To investigate the changes of gene expression in rat neurons induced by 1.8 GHz radiofrequency electromagnetic fields (RF EMF) and to screen for the RF EMF-responsive genes. **METHODS:** Newly-born SD rats in 24 hours were sacrificed to obtain cortex and hippocampus neurons. The cells were divided randomly into two groups: the experiment group (the irradiation group) and the control group (the false irradiation group). In the irradiation group, after twelve days' culture, neurons were exposed to 1.8 GHz RF EMF modulated by 217 Hz at a specific absorption rate (SAR) of 2 W/kg for 24 hours (5 minutes on/10 minutes off) while in the false control group, the neurons were put in the same waveguide as in the irradiation group, but were not exposed to any irradiation. The total RNA was isolated and purified immediately after exposure. The

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affymetrix rat neurobiology U34 assay was used for detecting the changes in gene expression profile according to the manufacturer's instruction. RF EMF-responsive candidate gene was confirmed by using ribonuclease protection assay (RPA). RESULTS: Among 1200 candidate genes, the expression levels of 34 genes were up or down regulated. Microtubule associated protein 2 (Map2) gene was selected as the candidate and subjected to further analysis. RPA data clearly revealed that Map2 was statistically significantly up-regulated after neurons were exposed to the RF EMF ($P < 0.05$). CONCLUSION: The modulation of gene expression and function of Map2 as a neuron specific cytoskeleton protein is crucial to maintain the normal framework and function of neurons. The finding that 1.8 GHz RF EMF exposure increases the expression of Map2 might indicate some unknown effects of RF EMF on neurons.

Goswami PC, Albee LD, Parsian AJ, Baty JD, Moros EG, Pickard WF, Roti Roti JL, Hunt CR, Proto-oncogene mRNA levels and activities of multiple transcription factors in C3H 10T 1/2 murine embryonic fibroblasts exposed to 835.62 and 847.74 MHz cellular phone communication frequency radiation. Radiat Res 151(3):300-309, 1999.

This study was designed to determine whether two differently modulated radiofrequencies of the type generally used in cellular phone communications could elicit a general stress response in a biological system. The two modulations and frequencies studied were a frequency-modulated continuous wave (FMCW) with a carrier frequency of 835.62 MHz and a code division multiple-access (CDMA) modulation centered on 847.74 MHz. Changes in proto-oncogene expression, determined by measuring Fos, Jun, and Myc mRNA levels as well as by the DNA-binding activity of the AP1, AP2 and NF-kappaB transcription factors, were used as indicators of a general stress response. The effect of radiofrequency exposure on proto-oncogene expression was assessed (1) in exponentially growing C3H 10T 1/2 mouse embryo fibroblasts during their transition to plateau phase and (2) during transition of serum-deprived cells to the proliferation cycle after serum stimulation. Exposure of serum-deprived cells to 835.62 MHz FMCW or 847.74 MHz CDMA microwaves (at an average specific absorption rate, SAR, of 0.6 W/kg) did not significantly change the kinetics of proto-oncogene expression after serum stimulation. Similarly, these exposures did not affect either the Jun and Myc mRNA levels or the DNA-binding activity of AP1, AP2 and NF-kappaB in exponential cells during transit to plateau-phase growth. Therefore, these results suggest that the radiofrequency exposure is unlikely to elicit a general stress response in cells of this cell line under these conditions. However, statistically significant increases (approximately 2-fold, $P = 0.001$) in Fos mRNA levels were detected in exponential cells in transit to the plateau phase and in plateau-phase cells exposed to 835.62MHz FMCW microwaves. For 847.74 MHz CDMA exposure, the increase was 1.4-fold ($P = 0.04$). This increase in Fos expression suggests that expression of specific genes could be affected by radiofrequency exposure.

Trosić I, Pavčić I, Milković-Kraus S, Mladinić M, Zeljezić D. Effect of electromagnetic radiofrequency radiation on the rats' brain, liver and kidney cells measured by comet assay. Coll Antropol. 35(4):1259-1264, 2011.

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The goal of study was to evaluate DNA damage in rat's renal, liver and brain cells after in vivo exposure to radiofrequency/microwave (Rf/Mw) radiation of cellular phone frequencies range. To determine DNA damage, a single cell gel electrophoresis/comet assay was used. Wistar rats (male, 12 week old, approximate body weight 350 g) (N = 9) were exposed to the carrier frequency of 915 MHz with Global System Mobile signal modulation (GSM), power density of 2.4 W/m², whole body average specific absorption rate SAR of 0.6 W/kg. The animals were irradiated for one hour/day, seven days/week during two weeks period. The exposure set-up was Gigahertz Transversal Electromagnetic Mode Cell (GTEM--cell). Sham irradiated controls (N = 9) were apart of the study. The body temperature was measured before and after exposure. There were no differences in temperature in between control and treated animals. Comet assay parameters such as the tail length and tail intensity were evaluated. In comparison with tail length in controls (13.5 +/- 0.7 microm), the tail was slightly elongated in brain cells of irradiated animals (14.0 +/- 0.3 microm). The tail length obtained for liver (14.5 +/- 0.3 microm) and kidney (13.9 +/- 0.5 microm) homogenates notably differs in comparison with matched sham controls (13.6 +/- 0.3 microm) and (12.9 +/- 0.9 microm). Differences in tail intensity between control and exposed animals were not significant. The results of this study suggest that, under the experimental conditions applied, repeated 915 MHz irradiation could be a cause of DNA breaks in renal and liver cells, but not affect the cell genome at the higher extent compared to the basal damage.

Gandhi G, Singh P. Cytogenetic damage in mobile phone users: preliminary data. Int J Hum Genet 5(4):259-265, 2005.

Mobile telephones, sometimes called cellular (cell) phones or handies, are now an integral part of modern life. The mobile phone handsets are low-powered radiofrequency transmitters, emitting maximum powers in the range of 0.2 to 0.6 watts. Scientific concerns have increased sufficiently over the possible hazard to health from using cell phones. The reported adverse health effects include physiological, behavioural and cognitive changes as well as tumour formation and genetic damage. However findings are controversial and no consensus exists. Genotoxicity has been observed either in lower organisms or in vitro studies. The aim of the present study hence was to detect any cytogenetic damage in mobile phone users by analysing short term peripheral lymphocyte cultures for chromosomal aberrations and the buccal mucosal cells for micronuclei (aneugenicity and clastogenicity). The results revealed increased number of micronucleated buccal cells and cytological abnormalities in cultured lymphocytes indicating the genotoxic response from mobile phone use.

Tiwari R, Lakshmi NK, Surender V, Rajesh AD, Bhargava SC, Ahuja YR. Combinative exposure effect of radio frequency signals from CDMA mobile phones and aphidicolin on DNA integrity. Electromagn Biol Med. 27(4):418-425, 2008.

The aim of present study is to assess DNA integrity on the effect of exposure to a radio frequency (RF) signal from Code Division Multiple Access (CDMA) mobile phones. Whole blood samples from six healthy male individuals were exposed for RF signals from a CDMA mobile phone for 1 h. Alkaline comet assay was performed to assess the DNA

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damage. The combinative exposure effect of the RF signals and APC at two concentrations on DNA integrity was studied. DNA repair efficiency of the samples was also studied after 2 h of exposure. The RF signals and APC (0.2 microg/ml) alone or in synergism did not have any significant DNA damage as compared to sham exposed. However, univariate analysis showed that DNA damage was significantly different among combinative exposure of RF signals and APC at 0.2 microg/ml ($p < 0.05$) and at 2 microg/ml ($p < 0.02$). APC at 2 microg/ml concentration also showed significant damage levels ($p < 0.05$) when compared to sham exposed. DNA repair efficiency also varied in a significant way in combinative exposure sets ($p < 0.05$). From these results, it appears that the repair inhibitor APC enhances DNA breaks at 2 microg/ml concentration and that the damage is possibly repairable. Thus, it can be inferred that the in vitro exposure to RF signals induces reversible DNA damage in synergism with APC.

Sykes PJ, McCallum BD, Bangay MJ, Hooker AM, Morley AA. Effect of Exposure to 900 MHz Radiofrequency Radiation on Intrachromosomal Recombination in pKZ1 Mice. *Radiat Res* 156(5):495-502, 2001.

Radiofrequency (RF) radiation emitted from mobile phones is not considered to be directly genotoxic, but it may have downstream effects on cellular DNA. We studied the effect of 4 W/kg pulsed 900 MHz RF radiation on somatic intrachromosomal recombination in the spleen in the pKZ1 recombination mutagenesis model. Somatic intrachromosomal recombination inversion events were detected in spleen tissue of pKZ1 mice by histochemical staining for E. coli beta-galactosidase protein in cells in which the lacZ transgene has undergone an inversion event. pKZ1 mice were exposed daily for 30 min to plane-wave fields of 900 MHz with a pulse repetition frequency of 217 Hz and a pulse width of 0.6 ms for 1, 5 or 25 days. Three days after the last exposure, spleen sections were screened for DNA inversion events. There was no significant difference between the control and treated groups in the 1- and 5-day exposure groups, but there was a significant reduction in inversions below the spontaneous frequency in the 25-day exposure group. This observation suggests that exposure to RF radiation can lead to a perturbation in recombination frequency which may have implications for recombination repair of DNA. The biological significance of a reduction below the spontaneous frequency is not known. The number of mice in each treatment group in this study was small ($n = 10$ or $n = 20$). Therefore, repetition of this study with a larger number of animals is required to confirm these observations.

Gajski G, Garaj-Vrhovac V. Radioprotective effects of honeybee venom (*Apis mellifera*) against 915-MHz microwave radiation-induced DNA damage in wistar rat lymphocytes: in vitro study. *Int J Toxicol*. 28(2):88-98, 2009.

The aim of this study is to investigate the radioprotective effect of bee venom against DNA damage induced by 915-MHz microwave radiation (specific absorption rate of 0.6 W/kg) in Wistar rats. Whole blood lymphocytes of Wistar rats are treated with 1 microg/mL bee venom 4 hours prior to and immediately before irradiation. Standard and formamidopyrimidine-DNA glycosylase (Fpg)-modified comet assays are used to assess basal and oxidative DNA damage produced by reactive oxygen species. Bee

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venom shows a decrease in DNA damage compared with irradiated samples. Parameters of Fpg-modified comet assay are statistically different from controls, making this assay more sensitive and suggesting that oxidative stress is a possible mechanism of DNA damage induction. Bee venom is demonstrated to have a radioprotective effect against basal and oxidative DNA damage. Furthermore, bee venom is not genotoxic and does not produce oxidative damage in the low concentrations used in this study.

Furtado-Filho OV, Borba JB, Dallegrave A, Pizzolato TM, Henriques JA, Moreira JC, Saffi J. Effect of 950 MHz UHF electromagnetic radiation on biomarkers of oxidative damage, metabolism of UFA and antioxidants in the livers of young rats of different ages. Int J Radiat Biol. 2013 Jul 25. [Epub ahead of print]

Purpose: To assess the effect of 950 MHz ultra-high-frequency electromagnetic radiation (UHF EMR) on biomarkers of oxidative damage, as well as to verify the concentration of unsaturated fatty acids (UFA) and the expression of the catalase in the livers of rats of different ages. Materials and methods: Twelve rats were equally divided into two groups as controls (CR) and exposed (ER), for each age (0, 6, 15 and 30 days). Radiation exposure lasted half an hour per day for up to 51 days (21 days of gestation and 6, 15 or 30 days of life outside the womb). The specific absorption rate (SAR) ranged from 1.3-1.0 W/kg. The damage to lipids, proteins and DNA was verified by thiobarbituric acid reactive substances (TBARS), protein carbonyls and comets, respectively. UFA were determined by gas chromatography with a flame ionization detector. The expression of catalase was by Western blotting. Results: The neonates had low levels of TBARS and concentrations of UFA after exposure. There was no age difference in the accumulation of protein carbonyls for any age. The DNA damage of ER 15 or 30 days was different. The exposed neonates exhibited lower expression of catalase. Conclusions: 950 MHz UHF EMR does not cause oxidative stress (OS), and it is not genotoxic to the livers of neonates or those of 6 and 15 day old rats, but it changes the concentrations of polyunsaturated fatty acid (PUFA) in neonates. For rats of 30 days, no OS, but it is genotoxic to the livers of ER to total body irradiation.

Donnellan M, McKenzie DR, French PW, Effects of exposure to electromagnetic radiation at 835 MHz on growth, morphology and secretory characteristics of a mast cell analogue, RBL-2H3. Cell Biol Int 21:427-439, 1997.

A mast cell line, RBL-2H3, was exposed to 835 MHz for 20 minutes, three times per day for 7 days at a power density of 8.1 +/- 3 mW/cm². From day 4 onwards, it was observed that the rate of DNA synthesis and cell replication increased, that actin distribution and cell morphology became altered, and the amount of beta-hexosaminidase (a marker of granule secretion) released in response to a calcium ionophore was significantly enhanced, in comparison to unexposed cultures. There were no effects seen on levels of cytoskeletal protein synthesis or of beta-actin mRNA. Morphological changes persisted following subculture for at least 7 days in the absence of further exposure. It is hypothesized that effects of exposure to an electromagnetic field at 835 MHz may be mediated via a signal transduction pathway.

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Sun LX, Yao K, He JL, Lu DQ, Wang KJ, Li HW. [Effect of acute exposure to microwave from mobile phone on DNA damage and repair of cultured human lens epithelial cells in vitro.] Zhonghua Lao Dong Wei Sheng Zhi Ye Bing Za Zhi. 24(8):465-467, 2006.

[Article in Chinese]

OBJECTIVE: To investigate the DNA damage of human lens epithelial cells (LECs) caused by acute exposure to low-power 217 Hz modulated 1.8 GHz microwave radiation and DNA repair. **METHODS:** Cultured LECs were exposed to 217 Hz modulated 1.8 GHz microwave radiation at SAR (specific absorption rate) of 0, 1, 2, 3 and 4 W/kg for 2 hours in an sXc-1800 incubator and irradiate system. The DNA single strand breaks were detected with comet assay in sham-irradiated cells and irradiated cells incubated for varying periods: 0, 30, 60, 120 and 240 min after irradiation. Images of comets were digitized and analyzed using an Imagine-pro plus software, and the indexes used in this study were tail length (TL) and tail moment (TM). **RESULTS:** The difference in DNA-breaks between the exposure and sham exposure groups induced by 1 and 2 W/kg irradiation was not significant at every detect time ($P > 0.05$). As for the dosage of 3 and 4 W/kg there was difference in both group immediately after irradiation ($P < 0.01$). At the time of 30 min after irradiation the difference went on at both group ($P < 0.01$). However, the difference disappeared after one hour's incubation in 3 W/kg group ($P > 0.05$), and existed in 4 W/kg group. **CONCLUSION:** No or repairable DNA damage was observed after 2 hour irradiation of 1.8 GHz microwave on LECs when $SAR \leq 3$ W/kg. The DNA damages caused by 4 W/kg irradiation were irreversible.

Belyaev IY, Hillert L, Protopopova M, Tamm C, Malmgren LO, Persson BR, Selivanova G, Harms-Ringdahl M. 915 MHz microwaves and 50 Hz magnetic field affect chromatin conformation and 53BP1 foci in human lymphocytes from hypersensitive and healthy persons. Bioelectromagnetics. 26(3):173-184, 2005.

We used exposure to microwaves from a global system for mobile communication (GSM) mobile phone (915 MHz, specific absorption rate (SAR) 37 mW/kg) and power frequency magnetic field (50 Hz, 15 μ T peak value) to investigate the response of lymphocytes from healthy subjects and from persons reporting hypersensitivity to electromagnetic field (EMF). The hypersensitive and healthy donors were matched by gender and age and the data were analyzed blind to treatment condition. The changes in chromatin conformation were measured with the method of anomalous viscosity time dependencies (AVTD). 53BP1 protein, which has been shown to colocalize in foci with DNA double strand breaks (DSBs), was analyzed by immunostaining in situ. Exposure at room temperature to either 915 MHz or 50 Hz resulted in significant condensation of chromatin, shown as AVTD changes, which was similar to the effect of heat shock at 41 degrees C. No significant differences in responses between normal and hypersensitive subjects were detected. Neither 915 MHz nor 50 Hz exposure induced 53BP1 foci. On the contrary, a distinct decrease in background level of 53BP1 signaling was observed upon these exposures as well as after heat shock treatments. This decrease correlated with the AVTD data and may indicate decrease in accessibility of 53BP1 to antibodies because of stress-induced chromatin condensation. Apoptosis was determined by morphological changes and by apoptotic fragmentation of DNA as

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analyzed by pulsed-field gel electrophoresis (PFGE). No apoptosis was induced by exposure to 50 Hz and 915 MHz microwaves. In conclusion, 50 Hz magnetic field and 915 MHz microwaves under specified conditions of exposure induced comparable responses in lymphocytes from healthy and hypersensitive donors that were similar but not identical to stress response induced by heat shock.

Belyaev IY, Koch CB, Terenius O, Roxstrom-Lindquist K, Malmgren LO, H Sommer W, Salford LG, Persson BR. Exposure of rat brain to 915 MHz GSM microwaves induces changes in gene expression but not double stranded DNA breaks or effects on chromatin conformation. Bioelectromagnetics.27(4):295-306,2006.

We investigated whether exposure of rat brain to microwaves (MWs) of global system for mobile communication (GSM) induces DNA breaks, changes in chromatin conformation and in gene expression. An exposure installation was used based on a test mobile phone employing a GSM signal at 915 MHz, all standard modulations included, output power level in pulses 2 W, specific absorption rate (SAR) 0.4 mW/g. Rats were exposed or sham exposed to MWs during 2 h. After exposure, cell suspensions were prepared from brain samples, as well as from spleen and thymus. For analysis of gene expression patterns, total RNA was extracted from cerebellum. Changes in chromatin conformation, which are indicative of stress response and genotoxic effects, were measured by the method of anomalous viscosity time dependencies (AVTD). DNA double strand breaks (DSBs) were analyzed by pulsed-field gel electrophoresis (PFGE). Effects of MW exposure were observed on neither conformation of chromatin nor DNA DSBs. Gene expression profiles were obtained by Affymetrix U34 GeneChips representing 8800 rat genes and analyzed with the Affymetrix Microarray Suite (MAS) 5.0 software. In cerebellum from all exposed animals, 11 genes were upregulated in a range of 1.34-2.74 fold and one gene was downregulated 0.48-fold ($P < .0025$). The induced genes encode proteins with diverse functions including neurotransmitter regulation, blood-brain barrier (BBB), and melatonin production. The data shows that GSM MWs at 915 MHz did not induce PFGE-detectable DNA double stranded breaks or changes in chromatin conformation, but affected expression of genes in rat brain cells

Phillips, J.L., Ivaschuk, O., Ishida-Jones, T., Jones, R.A., Campbell-Beachler, M. and Haggren, W. DNA damage in Molt-4 T- lymphoblastoid cells exposed to cellular telephone radiofrequency fields in vitro. Bioelectrochem. Bioenerg. 45:103-110, 1998. Molt-4 T-lymphoblastoid cells have been exposed to pulsed signals at cellular telephone frequencies of 813.5625 MHz (iDEN signal) and 836.55 MHz (TDMA signal). These studies were performed at low SAR (average = 2.4 and 24 microwatt/g for iDEN and 2.6 and 26 microwatt/g for TDMA) in studies designed to look for athermal RF effects. The alkaline comet, or single cell gel electrophoresis, assay was employed to measure DNA single-strand breaks in cell cultures exposed to the radiofrequency (RF) signal as compared to concurrent sham-exposed cultures. Tail moment and comet extent were calculated as indicators of DNA damage. Statistical differences in the distribution of values for tail moment and comet extent between exposed and control cell cultures were evaluated with the SKolmogorov-Smirnoff distribution test. Data points for all

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experiments of each exposure condition were pooled and analyzed as single groups. It was found that: 1) exposure of cells to the iDEN signal at an SAR of 2.4 microwatt/g for 2 h or 21 h significantly decreased DNA damage; 2) exposure of cells to the TDMA signal at an SAR of 2.6 microwatt/g for 2 h and 21 h significantly decreased DNA damage; 3) exposure of cells to the iDEN signal at an SAR of 24 microwatt/g for 2 h and 21 h significantly increased DNA damage; 4) exposure of cells to the TDMA signal at an SAR of 26 microwatt/g for 2 h significantly decreased DNA damage. The data indicate a need to study the effects of exposure to RF signals on direct DNA damage and on the rate at which DNA damage is repaired.

Belyaev IY, Markovà E, Hillert L, Malmgren LO, Persson BR. Microwaves from UMTS/GSM mobile phones induce long-lasting inhibition of 53BP1/gamma-H2AX DNA repair foci in human lymphocytes. *Bioelectromagnetics*.30(2):129-141, 2009

We have recently described frequency-dependent effects of mobile phone microwaves (MWs) of global system for mobile communication (GSM) on human lymphocytes from persons reporting hypersensitivity to electromagnetic fields and healthy persons. Contrary to GSM, universal global telecommunications system (UMTS) mobile phones emit wide-band MW signals. Hypothetically, UMTS MWs may result in higher biological effects compared to GSM signal because of eventual "effective" frequencies within the wideband. Here, we report for the first time that UMTS MWs affect chromatin and inhibit formation of DNA double-strand breaks co-localizing 53BP1/gamma-H2AX DNA repair foci in human lymphocytes from hypersensitive and healthy persons and confirm that effects of GSM MWs depend on carrier frequency. Remarkably, the effects of MWs on 53BP1/gamma-H2AX foci persisted up to 72 h following exposure of cells, even longer than the stress response following heat shock. The data are in line with the hypothesis that the type of signal, UMTS MWs, may have higher biological efficiency and possibly larger health risk effects compared to GSM radiation emissions. No significant differences in effects between groups of healthy and hypersensitive subjects were observed, except for the effects of UMTS MWs and GSM-915 MHz MWs on the formation of the DNA repair foci, which were different for hypersensitive ($P < 0.02[53BP1]/0.01[\text{gamma-H2AX}]$) but not for control subjects ($P > 0.05$). The non-parametric statistics used here did not indicate specificity of the differences revealed between the effects of GSM and UMTS MWs on cells from hypersensitive subjects and more data are needed to study the nature of these differences.

Belyaev IY. Radiation-induced DNA repair foci: Spatio-temporal aspects of formation, application for assessment of radiosensitivity and biological dosimetry. *Mutat Res*. 704(1-3):132-141, 2010.

Several proteins involved in DNA repair and DNA damage signaling have been shown to produce discrete foci in response to ionizing radiation. These foci are believed to co-localize to DSB and referred to as ionizing radiation-induced foci (IRIF) or DNA repair foci. Recent studies have revealed that some residual IRIF remain in cells for a relatively long time after irradiation, and have indicated a possible correlation between radiosensitivity of cells and residual IRIF. Remarkably, residual foci are significantly larger in size than

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the initial foci. Increase in the size of IRIF with time upon irradiation has been found in various cell types and has partially been correlated with dynamics and fusion of initial foci. Although it is admitted that the number of IRIF reflect that of DSB, several studies report a lack of correlation between kinetics for IRIF and DSB and a lack of co-localization between DSB repair proteins. These studies suggest that some proportion of residual IRIF that depend on cell type, dose, and post-irradiation time may represent alternations in chromatin structure after DSB have been repaired or misrepaired. While precise functions of residual foci are presently unknown, their possible link to remaining chromatin alternations, nuclear matrix, apoptosis, delayed repair and misrejoining of DSB, activity of several kinases, phosphatases, and checkpoint signaling has been suggested. Another intriguing possibility is that some of DNA repair foci may mark break-points at chromosomal aberrations (CA). While this possibility has not been confirmed substantially, the residual foci seem to be useful for biological dosimetry and estimation of individual radiosensitivity in radiotherapy of cancer.

Dawe AS, Smith B, Thomas DW, Greedy S, Vasic N, Gregory A, Loader B, de Pomerai DI. A small temperature rise may contribute towards the apparent induction by microwaves of heat-shock gene expression in the nematode *Caenorhabditis Elegans*. *Bioelectromagnetics*.27(2):88-97, 2006.

We have previously reported that low intensity microwave exposure (0.75-1.0 GHz CW at 0.5 W; SAR 4-40 mW/kg) can induce an apparently non-thermal heat-shock response in *Caenorhabditis elegans* worms carrying hsp16-1::reporter genes. Using matched copper TEM cells for both sham and exposed groups, we can detect only modest reporter induction in the latter exposed group (15-20% after 2.5 h at 26 degrees C, rising to approximately 50% after 20 h). Traceable calibration of our copper TEM cell by the National Physical Laboratory (NPL) reveals significant power loss within the cell (8.5% at 1.0 GHz), accompanied by slight heating of exposed samples (approximately 0.3 degrees C at 1.0 W). Thus, exposed samples are in fact slightly warmer (by ≤ 0.2 degrees C at 0.5 W) than sham controls. Following NPL recommendations, our TEM cell design was modified with the aim of reducing both power loss and consequent heating. In the modified silver-plated cell, power loss is only 1.5% at 1.0 GHz, and sample warming is reduced to approximately 0.15 degrees C at 1.0 W (i.e., ≤ 0.1 degrees C at 0.5 W). Under sham:sham conditions, there is no difference in reporter expression between the modified silver-plated TEM cell and an unmodified copper cell. However, worms exposed to microwaves (1.0 GHz and 0.5 W) in the silver-plated cell also show no detectable induction of reporter expression relative to sham controls in the copper cell. Thus, the 20% "microwave induction" observed using two copper cells may be caused by a small temperature difference between sham and exposed conditions. In worms incubated for 2.5 h at 26.0, 26.2, and 27.0 degrees C with no microwave field, there is a consistent and significant increase in reporter expression between 26.0 and 26.2 degrees C (by approximately 20% in each of the six independent runs), but paradoxically expression levels at 27.0 degrees C are similar to those seen at 26.0 degrees C. This surprising result is in line with other evidence pointing towards complex regulation of hsp16-1 gene expression across the sub-heat-shock range of 25-27.5 degrees C in C.

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elegans. We conclude that our original interpretation of a non-thermal effect of microwaves cannot be sustained; at least part of the explanation appears to be thermal.

P, Tattersall J, Jones D, Candido P, Non-thermal heat-shock response to microwaves, Nature 405:417-418, 2000.

Nematode worms (*C. elegans*) exposed overnight to 750-MHz microwaves at a SAR of 0.001 W/kg showed an increased in heat shock proteins (HSPs). (Heat shock proteins are induced in most organisms by adverse conditions (such as heat or toxins) that cause damage to cellular proteins, acting as molecular chaperones to rescue damaged proteins). The authors give several arguments that the microwave-induced effect on HSPs is non-thermal and suggest that 'current exposure limits for microwave equipment may need to be reconsidered.

de Pomerai DI, Dawe A, DjerbibL, Allan, Brunt G, Daniells C. Growth and maturation of the nematode *Caenorhabditis elegans* following exposure to weak microwave fields. Enzyme Microbial Tech 30:73-79, 2002.

Prolonged exposure to weak microwave fields (750-1000 MHz, 0.5 W) at 25°C induces a heat-shock response in transgenic *C. elegans* strains carrying *hsp16* reporter genes [1]. A comparable response to heat alone requires a substantially higher temperature of 28°C, suggesting that microwave heating of worms or of the system as a whole might provide a sufficient explanation, although this can be ruled out by indirect arguments [1]. Here we investigate two further biological consequences of prolonged microwave exposure at 25°C in synchronised cultures of wild-type worm larvae, namely alterations in (i) growth rate (GR) and (ii) the proportion of worms later maturing into egg-bearing adults (MP). Both of these parameters are significantly increased following microwave exposure (GR by 8-11%, and MP by 28-40%), whereas both are significantly decreased (GR by 10% and MP almost abolished) after mild heat treatment at 28°C for the same period. It follows that the biological consequences of microwave exposure are opposite to, and therefore incompatible with, those attributable to mild heating. This evidence does not in itself necessitate a non-thermal mechanism, but does eliminate explanations that invoke the bulk heating of tissues by microwaves. This latter, however, remains the sole basis for current regulations governing microwave exposure.

de Pomerai DI, Smith B, Dawe A, North K, Smith T, Archer DB, Duce IR, Jones D, Candido EP. Microwave radiation can alter protein conformation without bulk heating. FEBS Lett 543(1-3):93-97, 2003.

Exposure to microwave radiation enhances the aggregation of bovine serum albumin in vitro in a time- and temperature-dependent manner. Microwave radiation also promotes amyloid fibril formation by bovine insulin at 60 degrees C. These alterations in protein conformation are not accompanied by measurable temperature changes, consistent with estimates from field modelling of the specific absorbed radiation (15-20 mW kg⁻¹). Limited denaturation of cellular proteins could explain our previous observation that modest heat-shock responses are induced by microwave exposure in *Caenorhabditis elegans*. We also show that heat-shock responses both to heat and

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microwaves are suppressed after RNA interference ablating heat-shock factor function.

Tkalec M, Stambuk A, Srut M, Malarić K, Klobučar GI. Oxidative and genotoxic effects of 900 MHz electromagnetic fields in the earthworm *Eisenia fetida*. Ecotoxicol Environ Saf. 90:7-12, 2013.

Accumulating evidence suggests that exposure to radiofrequency electromagnetic field (RF-EMF) can have various biological effects. In this study the oxidative and genotoxic effects were investigated in earthworms *Eisenia fetida* exposed in vivo to RF-EMF at the mobile phone frequency (900 MHz). Earthworms were exposed to the homogeneous RF-EMF at field levels of 10, 23, 41 and 120 V m⁻¹ for a period of 2h using a Gigahertz Transversal Electromagnetic (GTEM) cell. At the field level of 23 V m⁻¹ the effect of longer exposure (4h) and field modulation (80% AM 1 kHz sinusoidal) was investigated as well. All exposure treatments induced significant genotoxic effect in earthworms coelomocytes detected by the Comet assay, demonstrating DNA damaging capacity of 900 MHz electromagnetic radiation. Field modulation additionally increased the genotoxic effect. Moreover, our results indicated the induction of antioxidant stress response in terms of enhanced catalase and glutathione reductase activity as a result of the RF-EMF exposure, and demonstrated the generation of lipid and protein oxidative damage. Antioxidant responses and the potential of RF-EMF to induce damage to lipids, proteins and DNA differed depending on the field level applied, modulation of the field and duration of *E. fetida* exposure to 900 MHz electromagnetic radiation. Nature of detected DNA lesions and oxidative stress as the mechanism of action for the induction of DNA damage are discussed.

Effects on Pregnancy and Fetus

Luo Q, Jiang Y, Jin M, Xu J, Huang HF. Proteomic Analysis on the Alteration of Protein Expression in the Early-Stage Placental Villous Tissue of Electromagnetic Fields Associated With Cell Phone Exposure. Reprod Sci. 2013 Feb 18. [Epub ahead of print]

Background:To explore the possible adverse effects and search for cell phone electromagnetic field (EMF)-responsive proteins in human early reproduction, a proteomics approach was employed to investigate the changes in protein expression profile induced by cell phone EMF in human chorionic tissues of early pregnancy in vivo. **Methods:**Volunteer women about 50 days pregnant were exposed to EMF at the average absorption rate of 1.6 to 8.8 W/kg for 1 hour with the irradiation device placed 10 cm away from the umbilicus at the midline of the abdomen. The changes in protein profile were examined using 2-dimensional electrophoresis (2-DE). **Results:**Up to 15 spots have yielded significant change at least 2- to 2.5-folds up or down compared to sham-exposed group. Twelve proteins were identified- procollagen-proline, eukaryotic translation elongation factor 1 delta, chain D crystal structure of human vitamin D-binding protein, thioredoxin-like 3, capping protein, isocitrate dehydrogenase 3 alpha, calumenin, Catechol-O-methyltransferase protein, proteinase inhibitor 6 (PI-6; SerpinB6) protein, 3,2-trans-enoyl-CoA isomerase protein, chain B human erythrocyte 2,3-

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bisphosphoglycerate mutase, and nucleoprotein. Conclusion: Cell phone EMF might alter the protein profile of chorionic tissue of early pregnancy, during the most sensitive stage of the embryos. The exposure to EMF may cause adverse effects on cell proliferation and development of nervous system in early embryos. Furthermore, 2-DE coupled with mass spectrometry is a promising approach to elucidate the effects and search for new biomarkers for environmental toxic effects.

Odacı E, Unal D, Mercantepe T, Topal Z, Hancı H, Türedi S, Erol H, Mungan S, Kaya H, Colakoğlu S. Pathological effects of prenatal exposure to a 900 MHz electromagnetic field on the 21-day-old male rat kidney. Biotech Histochem. 2014 Aug 27;1-9. [Epub ahead of print]

We investigated the effects on kidney tissue of 900 megahertz (MHz) EMF applied during the prenatal period. Pregnant rats were exposed to 900 MHz EMF, 1 h/day, on days 13-21 of pregnancy; no procedure was performed on control group pregnant rats or on mothers or newborns after birth. On postnatal day 21, kidney tissues of male rat pups from both groups were examined by light and electron microscopy. Malondialdehyde (MDA), superoxide dismutase (SOD), catalase (CAT) and glutathione levels also were investigated. Light microscopy revealed some degenerative changes in the tubule epithelium, small cystic formations in the primitive tubules and large cysts in the cortico-medullary or medullary regions in the experimental group. Electron microscopy revealed a loss of peritubular capillaries and atypical parietal layer epithelial cells in the experimental group. Biochemical analysis showed significantly increased MDA levels in the experimental group and decreased SOD and CAT levels. EMF applied during the prenatal period can caused pathological changes in kidney tissue in 21-day-old male rats owing to oxidative stress and decreased antioxidant enzyme levels.

Liu XY, Bian XM, Han JX, Cao ZJ, Fan GS, Zhang C, Zhang WL, Zhang SZ, Sun XG. [Risk factors in the living environment of early spontaneous abortion pregnant women] Zhongguo Yi Xue Ke Xue Yuan Xue Bao. 29(5):661-664, 2007. [Article in Chinese]

OBJECTIVE: To study the relationship between early spontaneous abortion and living environment, and explore the risk factors of spontaneous abortion. **METHODS:** We conducted analysis based on the interview of 200 spontaneous abortion cases and the matched control (age +/- 2 years) by using multifactor Logistic regression analysis. **RESULTS:** The proportions of watching TV > or =10 hours/week, operating computer > or =45 hours/week, using copycat, microwave oven and mobile phone, electromagnetism equipment near the dwell or work place, e. g. switch room < or =50 m and launching tower < or =500 m in the cases are significantly higher than those in the controls in single factor analysis (all P < 0.05). After adjusted the effect of other risk factors by multifactor analysis, using microwave oven and mobile phone, contacting abnormal smell of fitment material > or =3 months, having emotional stress during the first term of pregnancy and spontaneous abortion history were significantly associated with risk of spontaneous abortion. The odds ratios of these risk factors were 2.23 and 4.63, respectively. **CONCLUSION:** Using microwave oven and mobile phone, contacting

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abnormal smell of fitment material > or =3 months, having emotional stress during the first term of pregnancy, and spontaneous abortion history are risk factors of early spontaneous abortion.

Rezk AY, Abdulqawi K, Mustafa RM, Abo El-Azm TM, Al-Inany H. Fetal and neonatal responses following maternal exposure to mobile phones. *Saudi Med J.* 29(2):218-223, 2008.

OBJECTIVE: To study fetal and neonatal heart rate (HR) and cardiac output (COP), following acute maternal exposure to electromagnetic fields (EMF) emitted by mobile phones. **METHODS:** The present study was carried out at Benha University Hospital and El-Shorouq Hospital, Cairo, Egypt, from October 2003 to March 2004. Ninety women with uncomplicated pregnancies aged 18-33 years, and 30 full term healthy newborn infants were included. The pregnant mothers were exposed to EMF emitted by mobile telephones while on telephone-dialing mode for 10 minutes during pregnancy and after birth. The main outcome were measurements of fetal and neonatal HR and COP.

RESULTS: A statistical significant increase in fetal and neonatal HR, and statistical significant decrease in stroke volume and COP before and after use of mobile phone were noted. All these changes are attenuated with increase in gestational age.

CONCLUSION: Exposure of pregnant women to mobile phone significantly increase fetal and neonatal HR, and significantly decreased the COP.

Pyrpasopoulou A, Kotoula V, Cheva A, Hytioglou P, Nikolakaki E, Magras IN, Xenos TD, Tsiboukis TD, Karkavelas G. Bone morphogenetic protein expression in newborn rat kidneys after prenatal exposure to radiofrequency radiation. *Bioelectromagnetics* 25(3):216-227, 2004.

Effects of nonthermal radiofrequency radiation (RFR) of the global system of mobile communication (GSM) cellular phones have been as yet mostly studied at the molecular level in the context of cellular stress and proliferation, as well as neurotransmitter production and localization. In this study, a simulation model was designed for the exposure of pregnant rats to pulsed GSM-like RFR (9.4 GHz), based on the different resonant frequencies of man and rat. The power density applied was 5 microW/cm², in order to avoid thermal electromagnetic effects as much as possible. Pregnant rats were exposed to RFR during days 1-3 postcoitum (p.c.) (embryogenesis, pre-implantation) and days 4-7 p.c. (early organogenesis, peri-implantation). Relative expression and localization of bone morphogenetic proteins (BMP) and their receptors (BMPR), members of a molecular family currently considered as major endocrine and autocrine morphogens and known to be involved in renal development, were investigated in newborn kidneys from RFR exposed and sham irradiated (control) rats. Semi-quantitative duplex RT-PCR for BMP-4, -7, BMPR-IA, -IB, and -II showed increased BMP-4 and BMPR-IA, and decreased BMPR-II relative expression in newborn kidneys. These changes were statistically significant for BMP-4, BMPR-IA, and -II after exposure on days 1-3 p.c. (P <.001 each), and for BMP-4 and BMPR-IA after exposure on days 4-7 p.c. (P <.001 and P =.005, respectively). Immunohistochemistry and in situ hybridization (ISH) showed aberrant expression and localization of these molecules at the histological level.

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Our findings suggest that GSM-like RFR interferes with gene expression during early gestation and results in aberrations of BMP expression in the newborn. These molecular changes do not appear to affect renal organogenesis and may reflect a delay in the development of this organ. The differences of relative BMP expression after different time periods of exposure indicate the importance of timing for GSM-like RFR effects on embryonic development.

İkinci A, Odacı E, Yıldırım M, Kaya H, Akça M, Hancı H, Aslan A, Sönmez OF, Baş O. The Effects of Prenatal Exposure to a 900 Megahertz Electromagnetic Field on Hippocampus Morphology and Learning Behavior in Rat Pups. NeuroQuantology. 11(4):582-590, 2013.

The purpose of this study was to examine the effect on hippocampus morphology and learning behavior in rat pups following prenatal exposure to a 900 megahertz (MHz) electromagnetic field (EMF). Female Sprague Dawley rats weighing 180-250 g were left to mate with males. The following day, pregnant rats identified as such by the vaginal smear test were divided into two groups, control (n=3) and EMF (n=3). No procedures were performed on the control group. The rats in the EMF group were exposed to 900 MHz EMF on days 13 to 21 of pregnancy, for 1 h a day. Female rat pups were removed from their mothers at 22 days old. We then established two newborn rat groups, a 13 member control group and a 10 member EMF group. Radial arm maze and passive avoidance tests were used to measure rat pups' learning and memory performance. All rats were decapitated on the postnatal 32nd day. Routine histological procedures were performed on the brain tissues, and sections were stained with Cresyl fast violet. The radial arm maze (p=0.007) and passive avoidance (p=0.032) tests were administered to both groups under identical conditions, and compromised learning behavior was determined in the EMF group rats. Morphological compromise was also determined in the EMF group sections. Our results show that the application of a 900 MHz EMF in the prenatal period adversely affected female pups' learning behavior and also resulted in histopathological changes appearing in the hippocampus.

Ulubay M, Yahyazadeh A, Deniz OG, Kıvrak EG, Altunkaynak BZ, Erdem G, Kaplan S. Effects of prenatal 900 MHz electromagnetic field exposures on the histology of rat kidney. Int J Radiat Biol. 2014 Aug 1:1-25. [Epub ahead of print]

Purpose: To research the harmful effects of prenatal exposure of 900 megahertz (MHz) electromagnetic field (EMF) on kidneys of four-week-old male rats and to determine protective effects of melatonin (MEL) and omega-3 (ω -3). Materials and methods: Twenty-one Wistar albino rats were randomly placed into seven groups as follows: control (Cont), Sham, MEL, ω -3, EMF, EMF+MEL and EMF+ ω -3. After mating, three groups (EMF, EMF+MEL, EMF+ ω -3) were exposed to an EMF. In the fourth week subsequent to parturition, six rats were randomly chosen from each group. Mean volume of kidneys and renal cortices, the total number of glomeruli and basic histological structure of kidney were evaluated by stereological and light microscopical methods, respectively. Results: Stereological results determined the mean volume of the kidneys and cortices were significantly increased in EMF-exposed groups compared

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to the Cont group. However, EMF-unexposed groups were not significantly modified compared to the Cont group. Additionally, the total number of glomeruli was significantly higher in EMF-unexposed groups compared to the Cont group. Alternatively, the number of glomeruli in EMF-exposed groups was decreased compared to the Cont group. Conclusions: Prenatal exposure of rat kidneys to 900 MHz EMF resulted in increased total kidney volume and decreased the numbers of glomeruli. Moreover, MEL and ω -3 prevented adverse effects of EMF on the kidneys.

Köktürk S, Yardimoglu M, Celikozlu SD, Dolanbay EG, Cimbiz A. Effect of *Lycopersicon esculentum* extract on apoptosis in the rat cerebellum, following prenatal and postnatal exposure to an electromagnetic field. *Exp Ther Med.* 6(1):52-56, 2013.

The expansion of mobile phone technology has raised concerns regarding the effect of 900-MHz electromagnetic field (EMF) exposure on the central nervous system. At present, the developing human brain is regularly exposed to mobile telephones, pre- and postnatally. Several studies have demonstrated the acute effects of EMF exposure during pre- or postnatal periods; however, the chronic effects of EMF exposure are less understood. Thus, the aim of the present study was to determine the chronic effects of EMF on the pre- and postnatal rat cerebellum. The control group was maintained in the same conditions as the experimental groups, without the exposure to EMF. In the EMF1 group, the rats were exposed to EMF during pre- and postnatal periods (until postnatal day 80). In the EMF2 group, the rats were also exposed to EMF pre- and postnatally; in addition, however, they were provided with a daily oral supplementation of *Lycopersicon esculentum* extract (~2 g/kg). The number of caspase-3-labeled Purkinje neurons and granule cells present in the rats in the control and experimental groups were then counted. The neurodegenerative changes were studied using cresyl violet staining, and these changes were evaluated. In comparison with the control animals, the EMF1 group demonstrated a significant increase in the number of caspase-3-labeled Purkinje neurons and granule cells present in the cerebellum ($P < 0.001$). However, in comparison with the EMF1 group, the EMF2 group exhibited significantly fewer caspase-3-labeled Purkinje neurons and granule cells in the cerebellum. In the EMF1 group, the Purkinje neurons were revealed to have undergone dark neuron degenerative changes. However, the presence of dark Purkinje neurons was reduced in the EMF2 group, compared with the EMF1 group. The results indicated that apoptosis and neurodegeneration in rats exposed to EMF during pre- and postnatal periods may be reduced with *Lycopersicon esculentum* extract therapy.

Tillmann T, Ernst H, Streckert J, Zhou Y, Taugner F, Hansen V, Dasenbrock C. Indication of cocarcinogenic potential of chronic UMTS-modulated radiofrequency exposure in an ethylnitrosourea mouse model. *nt J Radiat Biol.* 86(7):529-541, 2010.

PURPOSE: To evaluate putative effects on tumour susceptibility in mice exposed to a UMTS (universal mobile telecommunications system) test signal for up to 24 months, commencing with embryo-fetal exposure. MATERIAL AND METHODS: Animals were exposed to UMTS fields with intensities of 0, 4.8, and 48 W/m², the low-dose group (4.8 W/m²) was subjected to additional prenatal ethylnitrosourea treatment (40 mg

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ENU/kg body weight).RESULTS: The high-level UMTS exposure (48 W/m(2)), the sham exposure, and the cage control groups showed comparable tumour incidences in the protocol organs. In contrast, the ENU-treated group UMTS-exposed at 4.8 W/m(2) displayed an enhanced lung tumour rate and an increased incidence of lung carcinomas as compared to the controls treated with ENU only. Furthermore, tumour multiplicity of the lung carcinomas was increased and the number of metastasising lung tumours was doubled in the ENU/UMTS group as compared to the ENU control group.CONCLUSION: This pilot study indicates a cocarcinogenic effect of lifelong UMTS exposure (4.8 W/m(2)) in female B6C3F1 descendants subjected to pretreatment with ethylnitrosourea.

Türedi S, Hancı H, Topal Z, Unal D, Mercantepe T, Bozkurt I, Kaya H, Odacı E. The effects of prenatal exposure to a 900-MHz electromagnetic field on the 21-day-old male rat heart. Electromagn Biol Med. 2014 Aug 28;1-8. [Epub ahead of print]

Abstract The growing spread of mobile phone use is raising concerns about the effect on human health of the electromagnetic field (EMF) these devices emit. The purpose of this study was to investigate the effects on rat pup heart tissue of prenatal exposure to a 900 megahertz (MHz) EMF. For this purpose, pregnant rats were divided into experimental and control groups. Experimental group rats were exposed to a 900 MHz EMF (1 h/d) on days 13-21 of pregnancy. Measurements were performed with rats inside the exposure box in order to determine the distribution of EMF intensity. Our measurements showed that pregnant experimental group rats were exposed to a mean electrical field intensity of 13.77 V/m inside the box (0.50 W/m²). This study continued with male rat pups obtained from both groups. Pups were sacrificed on postnatal day 21, and the heart tissues were extracted. Malondialdehyde, superoxide dismutase and catalase values were significantly higher in the experimental group rats, while glutathione values were lower. Light microscopy revealed irregularities in heart muscle fibers and apoptotic changes in the experimental group. Electron microscopy revealed crista loss and swelling in the mitochondria, degeneration in myofibrils and structural impairments in Z bands. Our study results suggest that exposure to EMF in the prenatal period causes oxidative stress and histopathological changes in male rat pup heart tissue.

Aldad TS, Gan G, Gao XB, Taylor HS. Fetal radiofrequency radiation exposure from 800-1900 mhz-rated cellular telephones affects neurodevelopment and behavior in mice. Sci Rep. 2012;2:312, 2012.

Neurobehavioral disorders are increasingly prevalent in children, however their etiology is not well understood. An association between prenatal cellular telephone use and hyperactivity in children has been postulated, yet the direct effects of radiofrequency radiation exposure on neurodevelopment remain unknown. Here we used a mouse model to demonstrate that in-utero radiofrequency exposure from cellular telephones does affect adult behavior. Mice exposed in-utero were hyperactive and had impaired memory as determined using the object recognition, light/dark box and step-down assays. Whole cell patch clamp recordings of miniature excitatory postsynaptic currents

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(mEPSCs) revealed that these behavioral changes were due to altered neuronal developmental programming. Exposed mice had dose-responsive impaired glutamatergic synaptic transmission onto layer V pyramidal neurons of the prefrontal cortex. We present the first experimental evidence of neuropathology due to in-utero cellular telephone radiation. Further experiments are needed in humans or non-human primates to determine the risk of exposure during pregnancy.

Barteri M, Pala A, Rotella S. Structural and kinetic effects of mobile phone microwaves on acetylcholinesterase activity. Biophys Chem. 113(3):245-253, 2005.

The present study provides evidence that "in vitro" simple exposure of an aqueous solution of electric eel acetylcholinesterase (EeAChE; EC 3.1.1.7.) to cellular phone emission alters its enzymatic activity. This paper demonstrates, by combining different experimental techniques, that radio frequency (RF) radiations irreversibly affect the structural and biochemical characteristics of an important CNS enzyme. These results were obtained by using a commercial cellular phone to reproduce the reality of the human exposition. This experimental procedure provided surprising effects collected practically without experimental errors because they were obtained comparing native and irradiated sample of the same enzyme solution. Although these results cannot be used to conclude whether exposure to RF during the use of cellular phone can lead to any hazardous health effect, they may be a significant first step towards further verification of these effects on other "ex vivo" or "in vivo" biological systems.

Cetin H, Nazıroğlu M, Celik O, Yüksel M, Pastacı N, Ozkaya MO. Liver antioxidant stores protect the brain from electromagnetic radiation (900 and 1800 MHz)-induced oxidative stress in rats during pregnancy and the development of offspring. J Matern Fetal Neonatal Med. 2014 Mar 3. [Epub ahead of print]

Objectives: The present study determined the effects of mobile phone (900 and 1800 MHz)-induced electromagnetic radiation (EMR) exposure on oxidative stress in the brain and liver as well as the element levels in growing rats from pregnancy to 6 weeks of age. **Methods:** Thirty-two rats and their offspring were equally divided into 3 different groups: the control, 900 MHz, and 1800 MHz groups. The 900 MHz and 1800 MHz groups were exposed to EMR for 60 min/day during pregnancy and neonatal development. At the 4th, 5th, and 6th weeks of the experiment, brain samples were obtained. **Results:** Brain and liver glutathione peroxidase (GSH-Px) activities, as well as liver vitamin A and β -carotene concentrations decreased in the EMR groups, although brain iron, vitamin A, and β -carotene concentrations increased in the EMR groups. In the 6th week, selenium concentrations in the brain decreased in the EMR groups. There were no statistically significant differences in glutathione, vitamin E, chromium, copper, magnesium, manganese, and zinc concentrations between the 3 groups. **Conclusion:** EMR-induced oxidative stress in the brain and liver was reduced during the development of offspring. Mobile phone-induced EMR could be considered as a cause of oxidative brain and liver injury in growing rats.

Odaci E, Bas O, Kaplan S. Effects of prenatal exposure to a 900 MHz electromagnetic

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field on the dentate gyrus of rats: a stereological and histopathological study.Brain Res. 1238:224-229, 2008.

Electromagnetic fields (EMFs) inhibit the formation and differentiation of neural stem cells during embryonic development. In this study, the effects of prenatal exposure to EMF on the number of granule cells in the dentate gyrus of 4-week-old rats were investigated. This experiment used a control (Cont) group and an EMF exposed (EMF) group (three pregnant rats each group). The EMF group consisted of six offspring (n=6) of pregnant rats that were exposed to an EMF of up to 900 megahertz (MHz) for 60 min/day between the first and last days of gestation. The control group consisted of five offspring (n=5) of pregnant rats that were not treated at all. The offspring were sacrificed when they were 4 weeks old. The numbers of granule cells in the dentate gyrus were analyzed using the optical fractionator technique. The results showed that prenatal EMF exposure caused a decrease in the number of granule cells in the dentate gyrus of the rats (P<0.01). This suggests that prenatal exposure to a 900 MHz EMF affects the development of the dentate gyrus granule cells in the rat hippocampus. Cell loss might be caused by an inhibition of granule cell neurogenesis in the dentate gyrus.

Odacı E, İkinci A, Yıldırım M, Kaya H, Akça M, Hancı H, Sönmez OF, Aslan A, Okuyan M, Baş O. The Effects of 900 Megahertz Electromagnetic Field Applied in the Prenatal Period on Spinal Cord Morphology and Motor Behavior in Female Rat Pups. NeuroQuantology 11:573-581, 2013.

This study investigated the effect of a 900 megahertz (MHz) electromagnetic field (EMF) applied in the prenatal period on the spinal cord and motor behavior of female rat pups. Beginning of the study, female Sprague Dawley rats (180–250 g) were left to mate with male rats. Rats identified as pregnant were then divided into control (n=3) and EMF groups (n=3). The EMF group was exposed to 1-h 900 MHz EMF daily between days 13 and 21 of pregnancy. At 21 days old, rat pups were removed from their mothers and divided into two newborn rat groups, control (n=13) and EMF (n=10). The rotarod test was applied to the rat pups to assess motor functions and the open field test to evaluate locomotor activity. On day 32 of the study, the rat pups were decapitated, and the spinal cord in the upper thoracic region was removed. Following routine histological tests, they were stained with Cresyl fast violet. Rotarod test results revealed a significant increase in EMF group rat pups' motor functions (p=0.037). However, no difference was observed in the open field test results (p>0.05). In the EMF group' rat pups, we observed pathological changes in the spinal cord. On the basis of our results, 900 MHz EMF applied in the prenatal period affected spinal cord development. This effect was observed in the form of pathological changes in the spinal cord of rat pups, and it may be that these pathological changes led to an increase in rat pups' motor activities.

Jing J, Yuhua Z, Xiao-qian Y, Rongping J, Dong-mei G, Xi C. The influence of microwave radiation from cellular phone on fetal rat brain. Electromagn Biol Med. 31(1):57-66, 2012.

The increasing use of cellular phones in our society has brought focus on the potential detrimental effects to human health by microwave radiation. The aim of our study was

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to evaluate the intensity of oxidative stress and the level of neurotransmitters in the brains of fetal rats chronically exposed to cellular phones. The experiment was performed on pregnant rats exposed to different intensities of microwave radiation from cellular phones. Thirty-two pregnant rats were randomly divided into four groups: CG, GL, GM, and GH. CG accepted no microwave radiation, GL group radiated 10 min each time, GM group radiated 30 min, and GH group radiated 60 min. The 3 experimental groups were radiated 3 times a day from the first pregnant day for consecutively 20 days, and on the 21st day, the fetal rats were taken and then the contents of superoxide dismutase (SOD), glutathione peroxidase (GSH-Px), malondialdehyde (MDA), noradrenaline (NE), dopamine (DA), and 5-hydroxyindole acetic acid (5-HT) in the brain were assayed. Compared with CG, there were significant differences ($P < 0.05$) found in the contents of SOD, GSH-Px, and MDA in GM and GH; the contents of SOD and GSH-Px decreased and the content of MDA increased. The significant content differences of NE and DA were found in fetal rat brains in GL and GH groups, with the GL group increased and the GH group decreased. Through this study, we concluded that receiving a certain period of microwave radiation from cellular phones during pregnancy has certain harm on fetal rat brains.

Dasdag S; Akdag MZ; Ayyıldız O, Demirtas OC, Yayla M, Sert C. Do cellular phones alter blood parameters and birth weight of rats? Electromag Biol Med. 19:107-113, 2000.

The present study aimed to investigate the effects of microwaves (MW) emitted by cellular phones (CPs) on peripheral blood parameters and birth weights of rats. Thirty-six albino rats were divided into four groups, male ($n = 6$) and female sham-exposed groups ($n = 12$) and male ($n = 6$) and female experimental groups ($n = 12$). No blood parameters differed following exposure ($p > 0.05$). The birth weight of offspring in the experimental group was significantly lower than in the sham-exposed group ($p < 0.001$). No significant differences were observed between rectal temperatures of rats in the sham and experimental groups ($p > 0.05$). The specific absorption rate (SAR) was found to be 0.155 W/kg for the experimental groups. All parameters investigated were normal in the next generation of rats ($p > 0.05$).

Fragopoulou AF, Koussoulakos SL, Margaritis LH. Cranial and postcranial skeletal variations induced in mouse embryos by mobile phone radiation. Pathophysiology. 17(3):169-177, 2010.

This study focuses on foetal development following mild daily exposure of pregnant mice to near field electromagnetic radiation emitted by a mobile phone. The investigation was motivated by the fact that the potentially hazardous electromagnetic radiation emitted by mobile phones is currently of tremendous public interest. Physically comparable pregnant mice were exposed to radiofrequency radiation GSM 900MHz emitted by a mobile phone. Within 5h after birth most cubs were fixed followed by double staining in toto, and conventional paraffin histology. Other cubs remained with their mothers until teeth eruption. Structural development was assessed by examining newborns for the presence of anomalies and/or variations in soft tissues

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and skeletal anatomy. Electromagnetic radiofrequency exposed newborns, externally examined, displayed a normal phenotype. Histochemical and histological studies, however, revealed variations in the exposed fetuses with respect to control ones concerning the ossification of cranial bones and thoracic cage ribs, as well as displacement of Meckelian cartilage. Littermates examined after teeth eruption displayed normal phenotypes. It is concluded that mild exposure to mobile phone radiation may affect, although transiently, mouse foetal development at the ossification level. The developmental variations observed could be explained by considering the different embryonic origin and mode of ossification of the affected skeletal elements.

Ferreira AR, Knakievicz T, de Bittencourt Pasquali MA, Gelain DP, Dal-Pizzol F, Fernandez CE, de Almeida de Salles AA, Ferreira HB, Moreira JC. Ultra high frequency-electromagnetic field irradiation during pregnancy leads to an increase in erythrocytes micronuclei incidence in rat offspring. *Life Sci.* 80(1)43-50, 2006.

Mobile telephones and their base stations are an important ultra high frequency-electromagnetic field (UHF-EMF) source and their utilization is increasing all over the world. Epidemiological studies suggested that low energy UHF-EMF emitted from a cellular telephone may cause biological effects, such as DNA damage and changes on oxidative metabolism. An in vivo mammalian cytogenetic test, the micronucleus (MN) assay, was used to investigate the occurrence of chromosomal damage in erythrocytes from rat offspring exposed to a non-thermal UHF-EMF from a cellular phone during their embryogenesis; the irradiated group showed a significant increase in MN occurrence. In order to investigate if UHF-EMF could also alter oxidative parameters in the peripheral blood and in the liver - an important hematopoietic tissue in rat embryos and newborns - we also measured the activity of antioxidant enzymes, quantified total sulfhydryl content, protein carbonyl groups, thiobarbituric acid-reactive species and total non-enzymatic antioxidant defense. No significant differences were found in any oxidative parameter of offspring blood and liver. The average number of pups in each litter has also not been significantly altered. Our results suggest that, under our experimental conditions, UHF-EMF is able to induce a genotoxic response in hematopoietic tissue during the embryogenesis through an unknown mechanism.

Haghani M, Shabani M, Moazzami K. Maternal mobile phone exposure adversely affects the electrophysiological properties of Purkinje neurons in rat offspring.

Neuroscience. 2013 Jul 29. pii: S0306-4522(13)00643-X. doi:

10.1016/j.neuroscience.2013.07.049. [Epub ahead of print]

Electromagnetic field (EMF) radiations emitted from mobile phones may cause structural damage to neurons. With the increased usage of mobile phones worldwide, concerns about their possible effects on the nervous system are rising. In the present study, we aimed to elucidate the possible effects of prenatal EMF exposure on the cerebellum of offspring Wistar rats. Rats in EMF group were exposed to 900 MHz Pulse-EMF irradiation for six hours per day during all gestation period. Ten offspring's per each group were evaluated for behavioral and electrophysiological evaluations. Cerebellum - related behavioral dysfunctions were analyzed using motor learning and cerebellum-

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dependent functional tasks (Accelerated Rotarod, Hanging and Open field tests). Whole cell- patch clamp recordings were used for electrophysiological evaluations. The results of the present study failed to show any behavioral abnormalities in rats exposed to chronic EMF radiation. However, whole cell patch clamp recordings revealed decreased neuronal excitability of Purkinje cells in rats exposed to EMF. The most prominent changes included afterhyperpolarization amplitude, spike frequency, half width and first spike latency. In conclusion, the results of the present study show that prenatal EMF exposure results in altered electrophysiological properties of Purkinje neurons. However, these changes may not be severe enough to alter the cerebellum-dependent functional tasks.

Col-Araz N. Evaluation of factors affecting birth weight and preterm birth in southern Turkey. J Pak Med Assoc. 2013 Apr;63(4):459-62.

OBJECTIVE: To identify factors affecting birth weight and pre-term birth, and to find associations with electromagnetic devices such as television, computer and mobile phones. **METHODS:** The study was conducted in Turkey at Gazintep University, Faculty of Medicine's Outpatient Clinic at the Paediatric Ward. It comprised 500 patients who presented at the clinic from May to December 2009. All participants were administered a questionnaire regarding their pregnancy history. SPSS 13 was used for statistical analysis. **RESULTS:** In the study, 90 (19%) patients had pre-term birth, and 64 (12.9%) had low birth weight rate Birth weight was positively correlated with maternal age and baseline maternal weight ($r = 0.115$, $p < 0.010$; $r = 0.168$, $p < 0.000$, respectively). Pre-term birth and birth weight less than 2500g were more common in mothers with a history of disease during pregnancy ($p < 0.046$ and $p < 0.008$, respectively). The habit of watching television and using mobile phones and computer by mothers did not demonstrate any relationship with birth weight. Mothers who used mobile phones or computers during pregnancy had more deliveries before 37 weeks ($p < 0.018$, $p < 0.034$; respectively). Similarly, pregnancy duration was shorter in mothers who used either mobile phone or computers during pregnancy ($p < 0.005$, $p < 0.048$, respectively). **CONCLUSION:** Mobile phones and computers may have an effect on pre-term birth.

Orhan Bař, Osman Fikret Sönmez, Ali Aslan, Ayře İkinci, Hatice Hancı, Mehmet Yıldırım, Haydar Kaya, Metehan Akça, Ersan Odacı. Pyramidal Cell Loss in the Cornu Ammonis of 32-day-old Female Rats Following Exposure to a 900 Megahertz Electromagnetic Field During Prenatal Days 13–21. NeuroQuantology 11:591-599, 2013.

The number of studies reporting that the electromagnetic field (EMF) emitted by mobile phones affects human health is increasing by the day. In previous studies we reported that a 900 megahertz (MHz) EMF applied throughout the prenatal period reduced the number of pyramidal cells in the cornu ammonis of rat pups in the postnatal period. In this study we investigated the effect of a 900 MHz EMF applied on days 13-21 of the prenatal period on the number of pyramidal cells in the cornu ammonis of rat pups in the postnatal period. For that purpose, pregnant rats were divided into experimental and control groups. Experimental group pregnant rats were exposed to the effect of a

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900 MHz EMF on days 13-21 of pregnancy. No procedure was applied to the control group. Newborn female rat pups were added to the study, and no procedure was performed on these after birth. Five newborn female rats were obtained from the experimental group and six from the control group. All female rat pups were decapitated on the postnatal 32nd day, and histological procedures were performed on the brain tissues. Sections were stained with Cresyl fast violet. The optical dissector technique was used to estimate the total number of pyramidal cells in the cornu ammonis. Sections of cornu ammonis were subjected to histopathological evaluations. Our results showed that exposure to 900 MHz EMF during prenatal days 13-21 led to a significant decrease in the number of pyramidal cells in the cornu ammonis of the experimental group female rat pups ($P < 0.05$). Histopathological examination revealed picnotic cells in the cornu ammonis in experimental female rat pups. The pyramidal cell loss in the cornu ammonis may therefore be attributed to exposure to 900 MHz EMF in days 13-21 of the prenatal period.

Ayşe İkinci, Ersan Odacı, Mehmet Yıldırım, Haydar Kaya, Metehan Akça, Hatice Hancı, Ali Aslan, Osman Fikret Sönmez, Orhan Baş. The Effects of Prenatal Exposure to a 900 Megahertz Electromagnetic Field on Hippocampus Morphology and Learning Behavior in Rat Pups. *NeuroQuantology*. 11(4):582-590. December 2013.

The purpose of this study was to examine the effect on hippocampus morphology and learning behavior in rat pups following prenatal exposure to a 900 megahertz (MHz) electromagnetic field (EMF). Female Sprague Dawley rats weighing 180-250 g were left to mate with males. The following day, pregnant rats identified as such by the vaginal smear test were divided into two groups, control ($n=3$) and EMF ($n=3$). No procedures were performed on the control group. The rats in the EMF group were exposed to 900 MHz EMF on days 13 to 21 of pregnancy, for 1 h a day. Female rat pups were removed from their mothers at 22 days old. We then established two newborn rat groups, a 13 member control group and a 10 member EMF group. Radial arm maze and passive avoidance tests were used to measure rat pups' learning and memory performance. All rats were decapitated on the postnatal 32nd day. Routine histological procedures were performed on the brain tissues, and sections were stained with Cresyl fast violet. The radial arm maze ($p=0.007$) and passive avoidance ($p=0.032$) tests were administered to both groups under identical conditions, and compromised learning behavior was determined in the EMF group rats. Morphological compromise was also determined in the EMF group sections. Our results show that the application of a 900 MHz EMF in the prenatal period adversely affected female pups' learning behavior and also resulted in histopathological changes appearing in the hippocampus.

Ozgur E, Kismali G, Guler G, Akcay A, Ozkurt G, Sel T, Seyhan N. Effects of Prenatal and Postnatal Exposure to GSM-Like Radiofrequency on Blood Chemistry and Oxidative Stress in Infant Rabbits, an Experimental Study. *Cell Biochem Biophys*. 2013 Mar 24. [Epub ahead of print]

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We aimed to investigate the potential hazardous effects of prenatal and/or postnatal exposure to 1800 MHz GSM-like radiofrequency radiation (RFR) on the blood chemistry and lipid peroxidation levels of infant rabbits. A total of 72 New Zealand female and male white rabbits aged 1-month were used. Thirty-six female and 36 male were divided into four groups which were composed of nine infants: (i) Group 1 were the sham exposure (control), (ii) Group 2 were exposed to RFR, 15 min daily for 7 days in the prenatal period (between 15th and 22nd days of the gestational period) (prenatal exposure group). (iii) Group 3 were exposed to RFR 15 min/day (14 days for male, whereas 7 days for female) after they reached 1-month of age (postnatal exposure group). (iv) Group 4 were exposed to RFR for 15 min daily during 7 days in the prenatal period (between 15th and 22nd days of the gestational period) and 15 min/day (14 days for male, whereas 7 days for female) after they reached 1-month of age (prenatal and postnatal exposure group). Results showed that serum lipid peroxidation level in both female and male rabbits changed due to the RFR exposure. However, different parameters of the blood biochemistry were affected by exposure in male and female infants. Consequently, the whole-body 1800 MHz GSM-like RFR exposure may lead to oxidative stress and changes on some blood chemistry parameters. Studies on RFR exposure during prenatal and postnatal periods will help to establish international standards for the protection of pregnant and newborns from environmental RFR.

Guler G, Tomruk A, Ozgur E, Seyhan N. The effect of radiofrequency radiation on DNA and lipid damage in non-pregnant and pregnant rabbits and their newborns. *Gen Physiol Biophys.* 29(1):59-66, 2010.

The concerns of people on possible adverse health effects of radiofrequency radiation (RFR) generated from mobile phones as well as their supporting transmitters (base stations) have increased markedly. RFR effect on oversensitive people, such as pregnant women and their developing fetuses, and older people is another source of concern that should be considered. In this study, oxidative DNA damage and lipid peroxidation levels in the brain tissue of pregnant and non-pregnant New Zealand White rabbits and their newborns exposed to RFR were investigated. Thirteen-month-old rabbits were studied in four groups as non-pregnant-control, non-pregnant-RFR exposed, pregnant-control and pregnant-RFR exposed. They were exposed to RFR (1800 MHz GSM; 14 V/m as reference level) for 15 min/day during 7 days. Malondialdehyde (MDA) and 8-hydroxy-2'-deoxyguanosine (8-OHdG) levels were analyzed. MDA and 8-OHdG levels of non-pregnant and pregnant-RFR exposed animals significantly increased with respect to controls ($p < 0.001$, Mann-Whitney test). No difference was found in the newborns ($p > 0.05$, Mann-Whitney). There exist very few experimental studies on the effects of RFR during pregnancy. It would be beneficial to increase the number of these studies in order to establish international standards for the protection of pregnant women from RFR.

Larsen AI, Olsen J, Svane O, Gender-specific reproductive outcome and exposure to high-frequency electromagnetic radiation among physiotherapists. *Scand J Work Environ Health* 17(5):324-329, 1991.

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The aim of this case-referent study was to investigate reproductive hazards other than congenital malformations after exposure to high-frequency electromagnetic radiation. Cases and referents were sampled from a cohort of pregnancies of members of the Union of Danish Physiotherapists through linkage of the union file with national medical registers. Case groups were spontaneous abortions and children with low birth-weight prematurity, and stillbirth/death within one year. Exposure to high-frequency electromagnetic radiation before and during pregnancy was assessed through telephone interviews. As referents to the 270 cases, 316 pregnancies were randomly sampled. A total of 8.4% did not participate. Only 23.5% of the children born by the highly exposed mothers were boys. This value is a statistically significantly altered gender ratio showing a dose-response pattern. High-frequency electromagnetic radiation was furthermore associated with low birthweight, but only for male newborns. The other outcomes were not statistically significantly associated with exposure to high-frequency electromagnetic radiation.

Kismali G, Ozgur E, Guler G, Akcay A, Sel T, Seyhan N. The influence of 1800 MHz GSM-like signals on blood chemistry and oxidative stress in non-pregnant and pregnant rabbits. *Int J Radiat Biol.* 88(5):414-419, 2012.

PURPOSE: Environmental electromagnetic fields originate from man-made sources, such as mobile phones and base stations, and have led to increasing public concern about their possible adverse health effects. We aimed to investigate the possible effects of radiofrequency radiation (RFR) generated from these devices on oversensitive animals, such as pregnant rabbits. MATERIALS AND METHODS: In the present study, the effects of whole body 1800 MHz Global System for Mobile Communications (GSM)-like RFR exposure for 15 min/day for seven days on blood chemistry and lipid peroxidation levels in both non-pregnant and pregnant New Zealand White rabbits were investigated. Thirteen-month-old rabbits were studied in the following four groups: Non-pregnant control, non-pregnant RFR-exposed, pregnant control and pregnant RFR-exposed. RESULTS: Lipid peroxidation, namely malondialdehyde (MDA) levels, did not change after RFR exposure. However, blood chemistry parameters, such as cholesterol (CHO), total protein (TP), albumin (ALB), uric acid, creatinin and creatine kinase (CK) and creatine kinase-myocardial band isoenzyme (CK-MB) changed due to both pregnancy and RFR exposure. CONCLUSION: Our investigations have been shown that no indication for oxidative stress was detected in the blood of pregnant rabbits upon RF exposure at specific conditions employed in the present study. Minor changes in some blood chemistry parameters were detected but CK-MB and CK increases were found remarkable. Studies on RFR exposure during pregnancy will help establish international standards for the protection of pregnant women from environmental RFR.

Gao X, Luo R, Ma B, Wang H, Liu T, Zhang J, Lian Z, Cui X. [Interference of vitamin E on the brain tissue damage by electromagnetic radiation of cell phone in pregnant and fetal rats]. *Wei Sheng Yan Jiu.* 2013 Jul;42(4):642-646.

[Article in Chinese]

OBJECTIVE: To investigate the interference of vitamin E on brain tissue damage by electromagnetic radiation of cell phone in pregnant and fetal rats. METHODS: 40

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pregnant rats were randomly divided into five groups (positive control, negative control, low, middle and high dosage of vitamin E groups). The low, middle and high dosage of vitamin E groups were supplemented with 5, 15 and 30 mg/ml vitamin E respectively since the first day of pregnancy. And the negative control group and the positive control group were given peanut oil without vitamin E. All groups except for the negative control group were exposed to 900MHz intensity of cell phone radiation for one hour each time, three times per day for 21 days. After accouchement, the right hippocampus tissue of fetal rats in each group was taken and observed under electron microscope. The vitality of superoxide dismutase (SOD) and glutathione peroxidase (GSH-Px), and the content of malondialdehyde (MDA) in pregnant and fetal rats' brain tissue were tested. RESULTS: Compared with the negative control group, the chondriosomes in neuron and neuroglia of brain tissues was swelling, mild edema was found around the capillary, chromatin was concentrated and collected, and bubbles were formed in vascular endothelial cells (VEC) in the positive fetal rat control group, whereas the above phenomenon was un-conspicuous in the middle and high dosage of vitamin E groups. We can see uniform chromatin, abundant mitochondrion, rough endoplasmic reticulum and free ribosomes in the high dosage group. The apoptosis has not found in all groups' sections. In the antioxidase activity analysis, compared with the negative control group, the vitality of SOD and GSH-Px significantly decreased and the content of MDA significantly increased both in the pregnant and fetal rats positive control group ($P < 0.05$). In fetal rats, the vitality of SOD and GSH-Px significantly increased in the brain tissues of all three different vitamin E dosages groups when compared with the positive control group, and the content of MDA was found significantly decreased in both middle and high dosage of vitamin E groups ($P < 0.05$). The same results have also been found in high dosage pregnant rat group, but in middle dosage group only SOD activity was found increased with significance ($P < 0.05$). With the dosage increase of vitamin E, the vitality of SOD and GSH-Px was increasing and the content of MDA was decreasing. CONCLUSION: Under the experimental dosage, vitamin E has certain interference on damage of antioxidant capacity and energy metabolism induced by electromagnetic radiation of cell phone in pregnant rats and fetal rats.

Batellier F, Couty I, Picard D, Brillard JP. Effects of exposing chicken eggs to a cell phone in "call" position over the entire incubation period. *Theriogenology*.69(6):737-745,2008

The aim of the present study was to assess the effects of exposing fertile chicken eggs to a cell phone repeatedly calling a ten-digit number at 3-min intervals over the entire period of incubation. A pre-experiment was performed first to adjust incubation conditions in an experimental chamber devoid of metallic content and without automatic turning until the overall performance of hatchability was reproducible in the absence of the cell phone. The experimental period consisted of a series of 4 incubations referred to as "replicates". For each replicate, one batch of 60 eggs was exposed to the immediate environment (≤ 25 cm) of a cell phone in the "call" position (exposed group), while another batch of 60 eggs, 1.5m away from the exposed group and also in the incubation chamber, was exposed to a similar cell phone in the "off"

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position (sham group). For each replicate, 2 other groups each of 60 eggs were also incubated, one in a standard mini-incubator ("Control I" group) and the second in a standard medium size incubator ("Control II" group). Temperature, relative humidity and electromagnetic fields in the experimental chamber were permanently monitored over the entire experiment. A significantly higher percentage of embryo mortality was observed in the "exposed" compared to the "sham" group in 2 of the 4 replicates ($p < .05$). In comparison with control groups, additional embryo mortality in the exposed group occurred mainly between Days 9 and 12 of incubation but a causal relationship between the intensity of the electric field and embryo mortality could not be established.

Sarapultseva EI, Igolkina JV, Tikhonov VN, Dubrova YE. THE IN VIVO EFFECTS OF LOW-INTENSITY RADIOFREQUENCY FIELDS ON THE MOTOR ACTIVITY OF PROTOZOA. Int J Radiat Biol. 2013 Nov 25. [Epub ahead of print]

Purpose: To analyze the direct and transgenerational effects of exposure to low-dose 1 GHz (mobile phone/wireless telecommunication range) and 10 GHz (radar/satellite communication range) radiofrequency electromagnetic fields (RF-EMF) on the motility of ciliates *Spirostomum ambiguum*. Materials and Methods: *S. ambiguum* were exposed to 1 GHz and 10 GHz RF-EMF with power flux densities (PD) ranging from 0.05 to 0.5 W/m² over a period of time from 0.05 to 10 h. The motility of directly exposed ciliates and their non-exposed progeny across 10-15 generations was measured. Results: Exposure to 0.1 W/m² of either 1 or 10 GHz RF-EMF resulted in a significant decrease in the motility. The dose of exposure capable of altering the mobility of ciliates was inversely correlated with the flux density of RF-EMF. The motility of the non-exposed progeny of ciliates irradiated with 0.1 W/m² of 10 GHz RF-EMF remained significantly compromised, at least, across 10-15 generations, thus indicating the presence of transgenerational effects. Conclusions: The results of our study show that low-dose exposure to RF-EMF can significantly affect the motility of irradiated ciliates and their non-exposed offspring, thus providing further insights into the unknown mechanisms underlying the in vivo effects of RF-EMF.

Effects on Fertility and Reproductive Organs

Wdowiak A, Wdowiak L, Wiktor H. Evaluation of the effect of using mobile phones on male fertility. Ann Agric Environ Med. 14(1):169-172, 2007.

The problem of the lack of offspring is a phenomenon concerning approximately 15% of married couples in Poland. Infertility is defined as inability to conceive after a year of sexual intercourses without the use of contraceptives. In half of the cases the causative factor is the male. Males are exposed to the effect of various environmental factors, which may decrease their reproductive capabilities. A decrease in male fertility is a phenomenon which occurs within years, which may suggest that one of the reasons for the decrease in semen parameters is the effect of the development of techniques in the

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surrounding environment. A hazardous effect on male fertility may be manifested by a decrease in the amount of sperm cells, disorders in their mobility, as well as structure. The causative agents may be chemical substances, ionizing radiation, stress, as well as electromagnetic waves. The objective of the study was the determination of the effect of the usage of cellular phones on the fertility of males subjected to marital infertility therapy. The following groups were selected from among 304 males covered by the study: Group A: 99 patients who did not use mobile phones, Group B: 157 males who have used GSM equipment sporadically for the period of 1-2 years, and Group C: 48 people who have been regularly using mobile phone for more than 2 years. In the analysis of the effect of GSM equipment on the semen it was noted that an increase in the percentage of sperm cells of abnormal morphology is associated with the duration of exposure to the waves emitted by the GSM phone. It was also confirmed that a decrease in the percentage of sperm cells in vital progressing motility in the semen is correlated with the frequency of using mobile phones.

Agarwal A, Deepinder F, Sharma RK, Ranga G, Li J. Effect of cell phone usage on semen analysis in men attending infertility clinic: an observational study. Fertil Steril.89(1):124-128, 2008.

OBJECTIVE: To investigate the effect of cell phone use on various markers of semen quality. DESIGN: Observational study. SETTING: Infertility clinic. PATIENT(S): Three hundred sixty-one men undergoing infertility evaluation were divided into four groups according to their active cell phone use: group A: no use; group B: <2 h/day; group C: 2-4 h/day; and group D: >4 h/day. INTERVENTION(S): None. MAIN OUTCOME MEASURE(S): Sperm parameters (volume, liquefaction time, pH, viscosity, sperm count, motility, viability, and morphology). RESULT(S): The comparisons of mean sperm count, motility, viability, and normal morphology among four different cell phone user groups were statistically significant. Mean sperm motility, viability, and normal morphology were significantly different in cell phone user groups within two sperm count groups. The laboratory values of the above four sperm parameters decreased in all four cell phone user groups as the duration of daily exposure to cell phones increased. CONCLUSION(S): Use of cell phones decrease the semen quality in men by decreasing the sperm count, motility, viability, and normal morphology. The decrease in sperm parameters was dependent on the duration of daily exposure to cell phones and independent of the initial semen quality.

Mailankot M, Kunnath AP, Jayalekshmi H, Koduru B, Valsalan R. Radio frequency electromagnetic radiation (RF-EMR) from GSM (0.9/1.8GHz) mobile phones induces oxidative stress and reduces sperm motility in rats. Clinics (Sao Paulo). 64(6):561-565, 2009.

INTRODUCTION: Mobile phones have become indispensable in the daily lives of men and women around the globe. As cell phone use has become more widespread, concerns have mounted regarding the potentially harmful effects of RF-EMR from these devices. OBJECTIVE: The present study was designed to evaluate the effects of RF-EMR from mobile phones on free radical metabolism and sperm quality. MATERIALS AND

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METHODS: Male albino Wistar rats (10-12 weeks old) were exposed to RF-EMR from an active GSM (0.9/1.8 GHz) mobile phone for 1 hour continuously per day for 28 days. Controls were exposed to a mobile phone without a battery for the same period. The phone was kept in a cage with a wooden bottom in order to address concerns that the effects of exposure to the phone could be due to heat emitted by the phone rather than to RF-EMR alone. Animals were sacrificed 24 hours after the last exposure and tissues of interest were harvested. **RESULTS:** One hour of exposure to the phone did not significantly change facial temperature in either group of rats. No significant difference was observed in total sperm count between controls and RF-EMR exposed groups. However, rats exposed to RF-EMR exhibited a significantly reduced percentage of motile sperm. Moreover, RF-EMR exposure resulted in a significant increase in lipid peroxidation and low GSH content in the testis and epididymis. **CONCLUSION:** Given the results of the present study, we speculate that RF-EMR from mobile phones negatively affects semen quality and may impair male fertility.

Rago R, Salacone P, Caponecchia L, Sebastianelli A, Marcucci I, Calogero AE, Condorelli R, Vicari E, Morgia G, Favilla V, Cimino S, Arcoria AF, La Vignera S. The semen quality of the mobile phone users. J Endocrinol Invest. 36(11):970-974, 2013.

BACKGROUND: The increased use of mobile phones, the media's attention for general health, and the increase of idiopathic male infertility suggest to investigate the possible consequences of an excessive use of mobile phones on semen quality. **AIM:** To evaluate the conventional and some of the main biofunctional sperm parameters in healthy men according to the different use of the mobile phone. **SUBJECTS AND METHODS:** All the enrolled subjects in this study were divided into four groups according to their active cell phone use: group A= no use (no.=10 subjects); group B= <2 h/day (no.=16); group C= 2-4 h/day (no.=17); and group D= >4 h/day (no.=20). Among the subjects of the group D (>4 h/day), a further evaluation was made between the "trousers users"(no.=12) and "shirt users"(no.=8), and they underwent semen collection to evaluate conventional and biofunctional sperm parameters (density, total count, morphology, progressive motility, apoptosis, mitochondrial membrane potential, chromatin compaction, DNA fragmentation). **RESULTS:** None of the conventional sperm parameters examined were significantly altered. However, the group D and the trousers users showed a higher percentage of sperm DNA fragmentation compared to other groups. **CONCLUSION:** These results suggest that the sperm DNA fragmentation could represent the only parameter significantly altered in the subjects who use the mobile phone for more than 4 h/day and in particular for those who use the device in the pocket of the trousers.

Qin F, Zhang J, Cao H, Guo W, Chen L, Shen O, Sun J, Yi C, Li J, Wang J, Tong J. Circadian alterations of reproductive functional markers in male rats exposed to 1800-MHz radiofrequency field. Chronobiol Int. 2013 Oct 11. [Epub ahead of print]

In this study, we explored the circadian effects of daily radiofrequency field (RF) exposure on reproductive functional markers in adult male Sprague-Dawley rats. Animals in circadian rhythm (as indicated by melatonin measurements), were

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divided into several groups and exposed to 1800 MHz RF at 205 $\mu\text{W}/\text{cm}^2$ power density (specific absorption rate 0.0405 W/kg) for 2 h/day for 32 days at different zeitgeber time (ZT) points, namely, ZT0, ZT4, ZT8, ZT12, ZT16 and ZT20. Sham-exposed animals were used as controls in the study. From each rat, testicular and epididymis tissues were collected and assessed for testosterone levels, daily sperm production and sperm motility, testis marker enzymes γ -GT and ACP, cytochrome P450 side-chain cleavage (p450cc) mRNA expression, and steroidogenic acute regulatory protein (StAR) mRNA expression. Via these measurements, we confirmed the existence of circadian rhythms in sham-exposed animals. However, rats exposed to RF exhibited a disruption of circadian rhythms, decreased testosterone levels, lower daily sperm production and sperm motility, down-regulated activity of γ -GT and ACP, as well as altered mRNA expression of cytochrome P450 and StAR. All of these observations were more pronounced when rats were exposed to RF at ZT0. Thus, our findings indicate potential adverse effects of RF exposure on male reproductive functional markers, in terms of both the daily overall levels as well as the circadian rhythmicity.

Sepehrimanesh M, Saeb M, Nazifi S, Kazemipour N, Jelodar G, Saeb S. Impact of 900 MHz electromagnetic field exposure on main male reproductive hormone levels: a Rattus norvegicus model. Int J Biometeorol. 2013 Dec 20. [Epub ahead of print]

This work analyzes the effects of radiofrequency-electromagnetic field (RF-EMF) exposure on the reproductive system of male rats, assessed by measuring circulating levels of FSH, LH, inhibin B, activin B, prolactin, and testosterone. Twenty adult male Sprague-Dawley rats (180 ± 10 g) were exposed to 900 MHz RF-EMF in four equal separated groups. The duration of exposure was 1, 2, and 4 h/day over a period of 30 days and sham-exposed animals were kept under the same environmental conditions as the exposed group except with no RF-EMF exposure. Before the exposure, at 15 and 30 days of exposure, determination of the abovementioned hormone levels was performed using ELISA. At the end of the experiment, FSH and LH values of the long time exposure (LTE) group were significantly higher than the sham-exposed group ($p < 0.05$). Serum activin B and prolactin in the LTE group showed significant increase and inhibin B showed significant decrease than sham and short time exposed (STE) groups after 30 days RF-EMF exposure ($p < 0.05$). Also, a significant decrease in serum testosterone levels in the LTE group was found compared to short and moderate time exposed (MTE) groups after 30 days RF-EMF exposure ($p < 0.05$). Results suggest that reproductive hormone levels are disturbed as a result of RF-EMF exposure and it may possibly affect reproductive functions. However, testosterone and inhibin B concentrations as a fertility marker and spermatogenesis were decreased significantly.

Zalata, A., A. Z. El-Samanoudy, D. Shaalan, Y. El-Baiomy, and T. Mostafa. In vitro effect of cell phone radiation on motility, DNA fragmentation and clusterin gene expression of sperm. Int J Fertil Steril, In Press. Published online ahead of print.

Background: Use of cellular phones that emits radiofrequency electromagnetic field (RF-EMF) has been increased exponentially and became a part of everyday life. This study

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aimed to investigate the effects of RF-EMF radiation emitted from cellular phones on sperm motility variables, sperm DNA fragmentation and clusterin (CLU) gene expression. Materials and Methods: 124 semen samples were grouped into; normozoospermia (N, n=26), asthenozoospermia (A, n=32), asthenoteratozoospermia (AT, n=31) and oligoasthenoteratozoospermia (OAT, n=35). Semen samples were divided into two aliquots; samples not exposed to cell phone and samples exposed to cell phone radiation (850 MHz, maximum power < 1 watt; SAR 1.46 W/kg at 10 cm distance) for 1 hr. Before and immediately after exposure both aliquots were subjected to assessment of sperm motility, acrosin activity, sperm DNA fragmentation and CLU gene expression. Statistical differences were analyzed using paired t-student test for comparisons where $P < 0.05$ was set as significant. Results: There was significant decrease in sperm motility, sperm linear velocity, sperm linearity index, sperm acrosin activity and significant increase in sperm DNA fragmentation percent, CLU gene expression and CLU protein levels in the exposed semen samples to RF-EMF compared with non- exposed samples in $OAT > AT > A > N$ groups ($P < 0.05$). Conclusions: Cell phone emissions have a negative impact on exposed sperm motility indices, sperm acrosin activity, sperm DNA fragmentation and CLU gene expression especially in OAT cases.

Guney M, Ozguner F, Oral B, Karahan N, Mungan T. 900 MHz radiofrequency-induced histopathologic changes and oxidative stress in rat endometrium: protection by vitamins E and C. *Toxicol Ind Health*. 23(7):411-420, 2007.

There are numerous reports on the effects of electromagnetic radiation (EMR) in various cellular systems. Mechanisms of adverse effects of EMR indicate that reactive oxygen species (ROS) may play a role in the biological effects of this radiation. The aims of this study were to examine 900 MHz mobile phone-induced oxidative stress that promotes production of ROS and to investigate the role of vitamins E and C, which have antioxidant properties, on endometrial tissue against possible 900 MHz mobile phone-induced endometrial impairment in rats. The animals were randomly grouped (eight each) as follows: 1) Control group (without stress and EMR, Group I), 2) sham-operated rats stayed without exposure to EMR (exposure device off, Group II), 3) rats exposed to 900 MHz EMR (EMR group, Group III) and 4) a 900 MHz EMR exposed + vitamin-treated group (EMR + Vit group, Group IV). A 900 MHz EMR was applied to EMR and EMR + Vit group 30 min/day, for 30 days using an experimental exposure device. Endometrial levels of nitric oxide (NO, an oxidant product) and malondialdehyde (MDA, an index of lipid peroxidation), increased in EMR exposed rats while the combined vitamins E and C caused a significant reduction in the levels of NO and MDA. Likewise, endometrial superoxide dismutase (SOD), catalase (CAT) and glutathione peroxidase (GSH-Px) activities decreased in EMR exposed animals while vitamins E and C caused a significant increase in the activities of these antioxidant enzymes. In the EMR group histopathologic changes in endometrium, diffuse and severe apoptosis was present in the endometrial surface epithelial and glandular cells and the stromal cells. Diffuse eosinophilic leucocyte and lymphocyte infiltration were observed in the endometrial stroma whereas the combination of vitamins E and C caused a significant decrease in these effects of EMR. It is concluded that oxidative endometrial damage plays an

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important role in the 900 MHz mobile phone-induced endometrial impairment and the modulation of oxidative stress with vitamins E and C reduces the 900 MHz mobile phone-induced endometrial damage both at biochemical and histological levels.

Agarwal A, Desai NR, Makker K, Varghese A, Mouradi R, Sabanegh E, Sharma R. Effects of radiofrequency electromagnetic waves (RF-EMW) from cellular phones on human ejaculated semen: an in vitro pilot study. Fertil Steril. 92(4) 1318-1325, 2009.

OBJECTIVE: To evaluate effects of cellular phone radiofrequency electromagnetic waves (RF-EMW) during talk mode on unprocessed (neat) ejaculated human semen. DESIGN: Prospective pilot study. SETTING: Center for reproductive medicine laboratory in tertiary hospital setting. SAMPLES: Neat semen samples from normal healthy donors (n = 23) and infertile patients (n = 9). INTERVENTION(S): After liquefaction, neat semen samples were divided into two aliquots. One aliquot (experimental) from each patient was exposed to cellular phone radiation (in talk mode) for 1 h, and the second aliquot (unexposed) served as the control sample under identical conditions. MAIN OUTCOME MEASURE(S): Evaluation of sperm parameters (motility, viability), reactive oxygen species (ROS), total antioxidant capacity (TAC) of semen, ROS-TAC score, and sperm DNA damage. RESULT(S): Samples exposed to RF-EMW showed a significant decrease in sperm motility and viability, increase in ROS level, and decrease in ROS-TAC score. Levels of TAC and DNA damage showed no significant differences from the unexposed group. CONCLUSION(S): Radiofrequency electromagnetic waves emitted from cell phones may lead to oxidative stress in human semen. We speculate that keeping the cell phone in a trouser pocket in talk mode may negatively affect spermatozoa and impair male fertility.

Susa M, Pavčić I. Djelovanje Radiofrekvencijskog Elektromagnetskog Zracenja na Spermatogenez u Sisavaca. Arh Hig Rada Toksikol. 58(4):449-459, 2007.

This article reviews studies about the effects of radiofrequency electromagnetic (RF EM) fields on male reproductive system and reproductive health in mammals. According to current data, there are almost 4 million active mobile phone lines in Croatia while this number has risen to 2 billion in the world. Increased use of mobile technology raises scientific and public concern about possible hazardous effects of RF fields on human health. The effects of radiofrequencies on reproductive health and consequences for the offspring are still mainly unknown. A number of in vivo and in vitro studies indicated that RF fields could interact with charged intracellular macromolecular structures. Results of several laboratory studies on animal models showed how the RF fields could affect the mammalian reproductive system and sperm cells. Inasmuch as, in normal physiological conditions spermatogenesis is a balanced process of division, maturation and storage of cells, it is particularly vulnerable to the chemical and physical environmental stimuli. Especially sensitive could be the cytoskeleton, composed of charged proteins; actin, intermedial filaments and microtubules. Cytoskeleton is a functional and structural part of the cell that has important role in the sperm motility, and is actively involved in the morphologic changes that occur during mammalian spermiogenesis.

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Yan JG, Agresti M, Bruce T, Yan YH, Granlund A, Matloub HS. Effects of cellular phone emissions on sperm motility in rats. *Fertil Steril*.88(4):957-64, 2007.

OBJECTIVE: To evaluate the effects of cellular phone emissions on rat sperm cells. DESIGN: Classic experimental. SETTING: Animal research laboratory. SUBJECTS: Sixteen 3-month-old male Sprague-Dawley rats, weighing 250-300 g. INTERVENTION(S): Rats in the experimental group were exposed to two 3-hour periods of daily cellular phone emissions for 18 weeks; sperm samples were then collected for evaluation. MAIN OUTCOME MEASURE(S): Evaluation of sperm motility, sperm cell morphology, total sperm cell number, and mRNA levels for two cell surface adhesion proteins. RESULT(S): Rats exposed to 6 hours of daily cellular phone emissions for 18 weeks exhibited a significantly higher incidence of sperm cell death than control group rats through chi-squared analysis. In addition, abnormal clumping of sperm cells was present in rats exposed to cellular phone emissions and was not present in control group rats. CONCLUSION(S): These results suggest that carrying cell phones near reproductive organs could negatively affect male fertility.

Salama N, Kishimoto T, Kanayama HO, Kagawa S. Effects of exposure to a mobile phone on sexual behavior in adult male rabbit: an observational study. *Int J Impot Res*.22(2):127-33, 2010.

The accumulating effects of exposure to electromagnetic radiation emitted by a conventional mobile phone (MP) on male sexual behaviour have not yet been analyzed. Therefore, we studied these effects in 18 male rabbits that were randomly divided into phone and control groups. Six female teasers were taken successively to the male's cage and the copulatory behavior was recorded. Serum total testosterone, dopamine and cortisol were evaluated. The animals of the phone group were exposed to MPs (800 MHz) in a standby position for 8 h daily for 12 weeks. At the end of the study, the copulatory behavior and hormonal assays were re-evaluated. Mounts without ejaculation were the main mounts in the phone group and its duration and frequency increased significantly compared with the controls, whereas the reverse was observed in its mounts with ejaculation. Ejaculation frequency dropped significantly, biting/grasping against teasers increased notably and mounting latency in accumulated means from the first to the fourth teasers were noted in the phone group. The hormonal assays did not show any significant differences between the study groups. Therefore, the pulsed radiofrequency emitted by a conventional MP, which was kept on a standby position, could affect the sexual behavior in the rabbit.

Salama N, Kishimoto T, Kanayama HO. Effects of exposure to a mobile phone on testicular function and structure in adult rabbit. *Int J Androl*.33(1):88-94, 2010.

Summary The accumulating effects of exposure to electromagnetic radiation emitted by a conventional mobile phone (standby position) on the testicular function and structure are not yet fully investigated. To study these effects longitudinally, a total of 24 adult male rabbits were randomly and equally divided into three groups. Rabbits in the first (phone) group were exposed, in specially designed cages, to radio frequency emitted from the mobile phone (800 MHz) in a standby position opposite to that of testes for 8 h

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daily for 12 weeks. The second group consisted of the stress controls which were kept in the same kind of cages to appreciate any cage-induced anxiety. The third group included the ordinary controls which were kept in the conventional roomy cages. Semen analysis and sperm function tests (viability, hypo-osmotic swelling and acridine orange) were conducted weekly. Histological testicular sections and serum total testosterone were also evaluated. A drop in the sperm concentration appeared in the phone group at week 6. This became statistically significant at week 8, compared with the two control (stress and ordinary) groups (133, 339 and 356 x 10⁶/mL, respectively) and to the initial sperm count (341 x 10⁶/mL) of this group. Motile sperm population showed similarity amongst the three study groups until week 10 when it declined significantly, and thereafter in the phone and stress control groups, with more significant decline in the phone animals (50, 61 and 72.4%, respectively). Histological examination showed also a significant decrease in the diameter of seminiferous tubules in the phone group vs. the stress and ordinary controls (191 μ m vs. 206 and 226 μ m, respectively). The other study points did not show any difference. In conclusion, low intensity pulsed radio frequency emitted by a conventional mobile phone kept in the standby position could affect the testicular function and structure in the adult rabbit.

Sepehrimanesh M, Kazemipour N, Saeb M, Nazifi S. Analysis of rat testicular proteome following 30-days exposure to 900 MHz electromagnetic field radiation.

Electrophoresis. 2014 Aug 21. doi: 10.1002/elps.201400273. [Epub ahead of print]

The use of electromagnetic field (EMF) generating apparatuses such as cell phones is increasing, and has caused an interest in the investigations of its effects on human health. We analyzed proteome in preparations from the whole testis in adult male Sprague-Dawley rats exposed for 1, 2 or 4 h/d for 30 consecutive days to 900 MHz EMF radiation, simulating a range of possible human cell phone use. Subjects were sacrificed immediately after the end of the experiment and testes fractions were solubilized and separated via high resolution 2-dimensional electrophoresis, and gel patterns were scanned, digitized and processed. Thirteen of the proteins which found only in sham or in exposure groups were identified by MALDI-TOF/TOF-MS. Among them, heat shock proteins, superoxide dismutase, peroxiredoxin-1 and other proteins related to misfolding of proteins and/or stress were identified. These results demonstrate significant effects of radio-frequency modulated electromagnetic fields (RF-EMF) exposure on proteome, particularly in protein species in the rodent testis, and suggest that a 30 d exposure to EMF radiation induces non-thermal stress in testicular tissue. The functional implication of the identified proteins was discussed.

Aitken RJ, Bennetts LE, Sawyer D, Wiklendt AM, King BV. Impact of radio frequency electromagnetic radiation on DNA integrity in the male germline. Inter J Androl 28:171-179, 2005.

Concern has arisen over human exposures to radio frequency electromagnetic radiation (RFEMR), including a recent report indicating that regular mobile phone use can negatively impact upon human semen quality. These effects would be particularly serious if the biological effects of RFEMR included the induction of DNA damage in male

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germ cells. In this study, mice were exposed to 900 MHz RFEMR at a specific absorption rate of approximately 90 mW/kg inside a waveguide for 7 days at 12 h per day. Following exposure, DNA damage to caudal epididymal spermatozoa was assessed by quantitative PCR (QPCR) as well as alkaline and pulsed-field gel electrophoresis. The treated mice were overtly normal and all assessment criteria, including sperm number, morphology and vitality were not significantly affected. Gel electrophoresis revealed no gross evidence of increased single- or double-DNA strand breakage in spermatozoa taken from treated animals. However, a detailed analysis of DNA integrity using QPCR revealed statistically significant damage to both the mitochondrial genome ($p < 0.05$) and the nuclear β -globin locus ($p < 0.01$). This study suggests that while RFEMR does not have a dramatic impact on male germ cell development, a significant genotoxic effect on epididymal spermatozoa is evident and deserves further investigation.

Tas M, Dasdag S, Akdag MZ, Cirit U, Yegin K, Seker U, Ozmen MF, Eren LB. Long-term effects of 900 MHz radiofrequency radiation emitted from mobile phone on testicular tissue and epididymal semen quality. Electromagn Biol Med. 2013 Jun 19. [Epub ahead of print]

Abstract The purpose of this study is to bridge this gap by investigating effects of long term 900 MHz mobile phone exposure on reproductive organs of male rats. The study was carried out on 14 adult Wistar Albino rats by dividing them randomly into two groups (n: 7) as sham group and exposure group. Rats were exposed to 900 MHz radiofrequency (RF) radiation emitted from a GSM signal generator. Point, 1 g and 10 g specific absorption rate (SAR) levels of testis and prostate were found as 0.0623 W/kg, 0.0445 W/kg and 0.0373 W/kg, respectively. The rats in the exposure group were subject to RF radiation 3 h per day (7 d a week) for one year. For the sham group, the same procedure was applied, except the generator was turned off. At the end of the study, epididymal sperm concentration, progressive sperm motility, abnormal sperm rate, all-genital organs weights and testis histopathology were evaluated. Any differences were not observed in sperm motility and concentration ($p > 0.05$). However, the morphologically normal spermatozoa rates were found higher in the exposure group ($p < 0.05$). Although histological examination showed similarity in the seminiferous tubules diameters in both groups, tunica albuginea thickness and the Johnsen testicular biopsy score were found lower in the exposure group ($p < 0.05$, $p < 0.0001$). In conclusion, we claim that long-term exposure of 900 MHz RF radiation alter some reproductive parameters. However, more supporting evidence and research is definitely needed on this topic.

Al-Ali BM, Patzak J, Fischereder K, Pummer K, Shamloul R. Cell phone usage and erectile function. Cent European J Urol. 66(1):75-77, 2013. INTRODUCTION: The objective of this pilot study was to report our experience concerning the effects of cell phone usage on erectile function (EF) in men. MATERIAL AND METHODS: We recruited 20 consecutive men complaining of erectile dysfunction (ED) for at least six months (Group A), and another group of 10 healthy men with no complaints of ED (Group B). Anamnesis, basic laboratory investigations, and clinical examinations were performed.

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All men completed the German version of the Sexual Health Inventory for Men (SHIM) for evaluation of the International Index of Erectile Function (IIEF), as well as another questionnaire designed by our clinicians that assessed cell phone usage habits. RESULTS: There was no significant difference between both groups regarding age, weight, height, and total testosterone (Table 1). The SHIM scores of Group A were significantly lower than that of Group B, 11.2 ± 5 and 24.2 ± 2.3 , respectively. Total time spent talking on the cell phone per week was not significantly higher in Group A over B, 17.6 ± 11.1 vs. 12.5 ± 7 hours. Men with ED were found to carry their 'switched on' cell phones for a significantly longer time than those without ED, 4.4 ± 3.6 vs. 1.8 ± 1 hours per day. CONCLUSIONS: We found a potential correlation with cell phone usage and a negative impact on EF. Further large-scale studies confirming our initial data and exploring the mechanisms involved in this phenomenon are recommended.

Fejes I, Za Vaczki Z, Szollosi J, Kolosza R S, Daru J, Kova Cs L, Pa L **Als there a relationship between cell phone use and semen quality? Arch Androl. 51(5):385-393, 2005.**

This study was conducted to determine a possible relationship between regular cell phone use and different human semen attributes. The history-taking of men in our university clinic was supplemented with questions concerning cell phone use habits, including possession, daily standby position and daily transmission times. Semen analyses were performed by conventional methods. Statistics were calculated with SPSS statistical software. A total of 371 were included in the study. The duration of possession and the daily transmission time correlated negatively with the proportion of rapid progressive motile sperm ($r = -0.12$ and $r = -0.19$, respectively), and positively with the proportion of slow progressive motile sperm ($r = 0.12$ and $r = 0.28$, respectively). The low and high transmitter groups also differed in the proportion of rapid progressive motile sperm (48.7% vs. 40.6%). The prolonged use of cell phones may have negative effects on the sperm motility characteristics.

Falzone N, Huyser C, Becker P, Leszczynski D, Franken DR. **The effect of pulsed 900-MHz GSM mobile phone radiation on the acrosome reaction, head morphometry and zona binding of human spermatozoa. Int J Androl. 34(1):20-26, 2011.**

Summary Several recent studies have indicated that radiofrequency electromagnetic fields (RF-EMF) have an adverse effect on human sperm quality, which could translate into an effect on fertilization potential. This study evaluated the effect of RF-EMF on sperm-specific characteristics to assess the fertilizing competence of sperm. Highly motile human spermatozoa were exposed for 1 h to 900-MHz mobile phone radiation at a specific absorption rate of 2.0 W/kg and examined at various times after exposure. The acrosome reaction was evaluated using flow cytometry. The radiation did not affect sperm propensity for the acrosome reaction. Morphometric parameters were assessed using computer-assisted sperm analysis. Significant reduction in sperm head area ($9.2 \pm 0.7 \mu\text{m}^2$ vs. $18.8 \pm 1.4 \mu\text{m}^2$) and acrosome percentage of the head area ($21.5 \pm 4\%$ vs. $35.5 \pm 11.4\%$) was reported among exposed sperm compared with unexposed controls. Sperm-zona binding was assessed directly after exposure using the

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hemizona assay. The mean number of zona-bound sperm of the test hemizona and controls was 22.8 ± 12.4 and 31.8 ± 12.8 ($p < 0.05$), respectively. This study concludes that although RF-EMF exposure did not adversely affect the acrosome reaction, it had a significant effect on sperm morphometry. In addition, a significant decrease in sperm binding to the hemizona was observed. These results could indicate a significant effect of RF-EMF on sperm fertilization potential.

Fejes I, Za Vaczki Z, Szollosi J, Kolosza R S, Daru J, Kova Cs L, Pa L **Als there a relationship between cell phone use and semen quality? Arch Androl. 51(5):385-393, 2005.**

This study was conducted to determine a possible relationship between regular cell phone use and different human semen attributes. The history-taking of men in our university clinic was supplemented with questions concerning cell phone use habits, including possession, daily standby position and daily transmission times. Semen analyses were performed by conventional methods. Statistics were calculated with SPSS statistical software. A total of 371 were included in the study. The duration of possession and the daily transmission time correlated negatively with the proportion of rapid progressive motile sperm ($r = -0.12$ and $r = -0.19$, respectively), and positively with the proportion of slow progressive motile sperm ($r = 0.12$ and $r = 0.28$, respectively). The low and high transmitter groups also differed in the proportion of rapid progressive motile sperm (48.7% vs. 40.6%). The prolonged use of cell phones may have negative effects on the sperm motility characteristics.

Erogul O, Oztas E, Yildirim I, Kir T, Aydur E, Komesli G, Irkilata HC, Irmak MK, Peker AF. **Effects of electromagnetic radiation from a cellular phone on human sperm motility: an in vitro study. Arch Med Res. 37(7):840-843, 2006.**

BACKGROUND: There has been growing public concern on the effects of electromagnetic radiation (EMR) emitted by cellular phones on human health. Many studies have recently been published on this topic. However, possible consequences of the cellular phone usage on human sperm parameters have not been investigated adequately. METHODS: A total number of 27 males were enrolled in the study. The semen sample obtained from each participant was divided equally into two parts. One of the specimens was exposed to EMR emitted by an activated 900 MHz cellular phone, whereas the other was not. The concentration and motility of the specimens were compared to analyze the effects of EMR. Assessment of sperm movement in all specimens was performed using four criteria: (A) rapid progressive, (B) slow progressive, (C) nonprogressive, (D) no motility. RESULTS: Statistically significant changes were observed in the rapid progressive, slow progressive and no-motility categories of sperm movement. EMR exposure caused a subtle decrease in the rapid progressive and slow progressive sperm movement. It also caused an increase in the no-motility category of sperm movement. There was no statistically significant difference in the sperm concentration between two groups. CONCLUSIONS: These data suggest that EMR emitted by cellular phone influences human sperm motility. In addition to these acute adverse effects of EMR on sperm motility, long-term EMR exposure may lead to

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behavioral or structural changes of the male germ cell. These effects may be observed later in life, and they are to be investigated more seriously.

De Iuliis GN, Newey RJ, King BV, Aitken RJ. Mobile phone radiation induces reactive oxygen species production and DNA damage in human spermatozoa in vitro. *PLoS One*. 4(7):e6446, 2009.

BACKGROUND: In recent times there has been some controversy over the impact of electromagnetic radiation on human health. The significance of mobile phone radiation on male reproduction is a key element of this debate since several studies have suggested a relationship between mobile phone use and semen quality. The potential mechanisms involved have not been established, however, human spermatozoa are known to be particularly vulnerable to oxidative stress by virtue of the abundant availability of substrates for free radical attack and the lack of cytoplasmic space to accommodate antioxidant enzymes. Moreover, the induction of oxidative stress in these cells not only perturbs their capacity for fertilization but also contributes to sperm DNA damage. The latter has, in turn, been linked with poor fertility, an increased incidence of miscarriage and morbidity in the offspring, including childhood cancer. In light of these associations, we have analyzed the influence of RF-EMR on the cell biology of human spermatozoa in vitro. PRINCIPAL FINDINGS: Purified human spermatozoa were exposed to radio-frequency electromagnetic radiation (RF-EMR) tuned to 1.8 GHz and covering a range of specific absorption rates (SAR) from 0.4 W/kg to 27.5 W/kg. In step with increasing SAR, motility and vitality were significantly reduced after RF-EMR exposure, while the mitochondrial generation of reactive oxygen species and DNA fragmentation were significantly elevated ($P < 0.001$). Furthermore, we also observed highly significant relationships between SAR, the oxidative DNA damage bio-marker, 8-OH-dG, and DNA fragmentation after RF-EMR exposure. CONCLUSIONS: RF-EMR in both the power density and frequency range of mobile phones enhances mitochondrial reactive oxygen species generation by human spermatozoa, decreasing the motility and vitality of these cells while stimulating DNA base adduct formation and, ultimately DNA fragmentation. These findings have clear implications for the safety of extensive mobile phone use by males of reproductive age, potentially affecting both their fertility and the health and wellbeing of their offspring.

Falzone N, Huyser C, Becker P, Leszczynski D, Franken DR. The effect of pulsed 900-MHz GSM mobile phone radiation on the acrosome reaction, head morphometry and zona binding of human spermatozoa. *Int J Androl*. 34(1):20-26, 2011.

Summary Several recent studies have indicated that radiofrequency electromagnetic fields (RF-EMF) have an adverse effect on human sperm quality, which could translate into an effect on fertilization potential. This study evaluated the effect of RF-EMF on sperm-specific characteristics to assess the fertilizing competence of sperm. Highly motile human spermatozoa were exposed for 1 h to 900-MHz mobile phone radiation at a specific absorption rate of 2.0 W/kg and examined at various times after exposure. The acrosome reaction was evaluated using flow cytometry. The radiation did not affect sperm propensity for the acrosome reaction. Morphometric parameters were assessed

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using computer-assisted sperm analysis. Significant reduction in sperm head area ($9.2 \pm 0.7 \mu\text{m}^2$ vs. $18.8 \pm 1.4 \mu\text{m}^2$) and acrosome percentage of the head area ($21.5 \pm 4\%$ vs. $35.5 \pm 11.4\%$) was reported among exposed sperm compared with unexposed controls. Sperm-zona binding was assessed directly after exposure using the hemizona assay. The mean number of zona-bound sperm of the test hemizona and controls was 22.8 ± 12.4 and 31.8 ± 12.8 ($p < 0.05$), respectively. This study concludes that although RF-EMF exposure did not adversely affect the acrosome reaction, it had a significant effect on sperm morphometry. In addition, a significant decrease in sperm binding to the hemizona was observed. These results could indicate a significant effect of RF-EMF on sperm fertilization potential.

Kesari KK, Kumar S, Nirala J, Siddiqui MH, Behari J. Biophysical Evaluation of Radiofrequency Electromagnetic Field Effects on Male Reproductive Pattern. Cell Biochem Biophys. 65(2): 85-96, 2013 .

There are possible hazardous health effects of exposure to radiofrequency electromagnetic radiations emitted from mobile phone on the human reproductive pattern. It is more effective while keeping mobile phones in pocket or near testicular organs. Present review examines the possible concern on radio frequency radiation interaction and biological effects such as enzyme induction, and toxicological effects, including genotoxicity and carcinogenicity, testicular cancer, and reproductive outcomes. Testicular infertility or testicular cancer due to mobile phone or microwave radiations suggests an increased level of reactive oxygen species (ROS). Though generation of ROS in testis has been responsible for possible toxic effects on physiology of reproduction, the reviews of last few decades have well established that these radiations are very harmful and cause mutagenic changes in reproductive pattern and leads to infertility. The debate will be focused on bio-interaction mechanism between mobile phone and testicular cancer due to ROS formation. This causes the biological damage and leads to several changes like decreased sperm count, enzymatic and hormonal changes, DNA damage, and apoptosis formation. In the present review, physics of mobile phone including future research on various aspects has been discussed.

Salama N, Kishimoto T, Kanayama HO, Kagawa S. The mobile phone decreases fructose but not citrate in rabbit semen: a longitudinal study. Syst Biol Reprod Med. 55(5):181-187, 2009.

The negative impact of mobile phones on sperm motility has been previously described. Both fructose and citrate are important components in semen that facilitate sperm motility. To date, no studies have investigated the effect of exposure to electromagnetic radiation emitted from the mobile phone on their levels.. Therefore, a longitudinal study using the adult rabbit as a model was undertaken. A total of 30 adult male rabbits were randomly divided into three groups. The first (phone) group was placed in specially designed cages, and exposed to radio frequency emitted from a mobile phone (900 MHz) kept in standby mode and positioned adjacent to the genitalia for 8 h daily for 12 weeks. The other two groups served as controls; the stress group which was housed in

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the same kind of cages to evaluate any cage-induced anxiety, and the control group which was housed in the conventional roomy cages. Semen samples were retrieved weekly. Sperm motility and viability, semen fructose and citrate, and serum testosterone were measured. Histological sections from the prostatic complex, ampulla, and vesicular gland were evaluated. A significant drop in both fructose levels (257 +/- 11.6 vs. 489 +/- 8.4 mg %, the baseline level) and number of motile sperms (50 vs. 72%) was observed in the phone group at the 10th week. However, no correlation was found between the two values. The stress control animals showed a similar but significantly less decline in motility. No significant changes in citrate levels or other study parameters were seen in the three animal groups throughout the study. In conclusion, the pulsed radio frequency emitted by the mobile phone kept in the standby position longitudinally affected sperm motility and fructose but not citrate levels in rabbit semen.

Kesari KK, Behari J. Evidence for mobile phone radiation exposure effects on reproductive pattern of male rats: Role of ROS. Electromagn Biol Med. 31(3):213-22, 2012.

The relationship between radiofrequency electromagnetic fields emitted from mobile phone and infertility is a matter of continuing debate. It is postulated that these radiations may affect the reproduction pattern by targeting biochemistry of sperm. In an attempt to expedite the issue, 70 days old Wistar rats (n = 6) were exposed to mobile phone radiofrequency (RF) radiation for 2 h per day for 45 days and data compared with sham exposed (n = 6) group. A significant decrease (P < 0.05) in the level of testosterone and an increase in caspase-3 activity were found in the RF-exposed animals. Distortions in sperm head and mid piece of sperm mitochondrial sheath were also observed as captured by Transmission Electron Microscope (TEM). In addition, progeny from RF-exposed rats showed significant decreases in number and weight as compared with that of sham-exposed animals. A reduction in testosterone, an increase in caspase-3, and distortion in spermatozoa could be caused by overproduction of reactive oxygen species (ROS) in animals under mobile phone radiation exposure. Our findings on these biomarkers are clear indications of possible health implications of repeated exposure to mobile phone radiation.

Kesari KK, Kumar S, Behari J. Mobile phone usage and male infertility in Wistar rats. Indian J Exp Biol. 48(10):987-992, 2010.

A significant decrease in protein kinase C and total sperm count along with increased apoptosis were observed in male Wistar rats exposed to mobile phone frequencies (2 h/day x 35 days at 0.9 W/kg specific absorption rate). The results suggest that a reduction in protein kinase activity may be related to overproduction of reactive oxygen species (ROS) under microwave field exposure. Decrease in sperm count and an increase in apoptosis may be causative factor due to mobile radiation exposure leading to infertility.

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Kesari KK, Kumar S, Behari J. Effects of Radiofrequency Electromagnetic Wave Exposure from Cellular Phones on the Reproductive Pattern in Male Wistar Rats. Appl Biochem Biotechnol. 164(4):546-559, 2011.

The present study investigates the effect of free radical formation due to mobile phone exposure and effect on fertility pattern in 70-day-old male Wistar rats (sham exposed and exposed). Exposure took place in Plexiglas cages for 2 h a day for 35 days to mobile phone frequency. The specific absorption rate was estimated to be 0.9 W/kg. An analysis of antioxidant enzymes glutathione peroxidase ($P < 0.001$) and superoxide dismutase ($P < 0.007$) showed a decrease, while an increase in catalase ($P < 0.005$) was observed. Malondialdehyde ($P < 0.003$) showed an increase and histone kinase ($P = 0.006$) showed a significant decrease in the exposed group. Micronuclei also show a significant decrease ($P < 0.002$) in the exposed group. A significant change in sperm cell cycle of G(0)-G(1) ($P = 0.042$) and G(2)/M ($P = 0.022$) were recorded. Generation of free radicals was recorded to be significantly increased ($P = 0.035$). Our findings on antioxidant, malondialdehyde, histone kinase, micronuclei, and sperm cell cycle are clear indications of an infertility pattern, initiated due to an overproduction of reactive oxygen species. It is concluded that radiofrequency electromagnetic wave from commercially available cell phones might affect the fertilizing potential of spermatozoa.

Nazıroğlu M, Yüksel M, Köse SA, Özkaya MO. Recent reports of Wi-Fi and mobile phone-induced radiation on oxidative stress and reproductive signaling pathways in females and males. J Membr Biol. 246(12):869-875, 2013.

Environmental exposure to electromagnetic radiation (EMR) has been increasing with the increasing demand for communication devices. The aim of the study was to discuss the mechanisms and risk factors of EMR changes on reproductive functions and membrane oxidative biology in females and males. It was reported that even chronic exposure to EMR did not increase the risk of reproductive functions such as increased levels of neoantigens abort. However, the results of some studies indicate that EMR induced endometriosis and inflammation and decreased the number of follicles in the ovarium or uterus of rats. In studies with male rats, exposure caused degeneration in the seminiferous tubules, reduction in the number of Leydig cells and testosterone production as well as increases in luteinizing hormone levels and apoptotic cells. In some cases of male and female infertility, increased levels of oxidative stress and lipid peroxidation and decreased values of antioxidants such as melatonin, vitamin E and glutathione peroxidase were reported in animals exposed to EMR. In conclusion, the results of current studies indicate that oxidative stress from exposure to Wi-Fi and mobile phone-induced EMR is a significant mechanism affecting female and male reproductive systems. However, there is no evidence to this date to support an increased risk of female and male infertility related to EMR exposure.

Ozlem Nisbet H, Nisbet C, Akar A, Cevik M, Karayigit MO. Effects of exposure to electromagnetic field (1.8/0.9 GHz) on testicular function and structure in growing rats. Res Vet Sci. 93(2):1001-1005, 2012.

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The aim of our study was to evaluate the possible effects of whole-body electromagnetic field (EMF) exposure on reproduction in growing male rats. Male albino Wistar rats (2 days old) were exposed to EMF 1800 and 900 MHz for 2 h continuously per day for 90 days. Sham control was kept under similar conditions except that the field was not applied for the same period. After blood samples were collected, the animals were sacrificed 24 h after the last exposure and the tissues of interest were harvested. The mean plasma total testosterone showed similarity among the two study groups and was significantly higher than the sham control rats. The percentage of epididymal sperm motility was significantly higher in the 1800 MHz group ($P<0.05$). The morphologically normal spermatozoa rates were higher and the tail abnormality and total percentage abnormalities were lower in the 900 MHz group ($P<0.05$). Histopathologic parameters in the 1800 MHz group were significantly higher ($P<0.05$). In conclusion, the present study indicated that exposure to electromagnetic wave caused an increase in testosterone level, epididymal sperm motility (forward), and normal sperm morphology of rats. As a consequences, 1800 and 900 MHz EMF could be considered to be a cause of precocious puberty in growing rats.

Meo SA, Al-Drees AM, Husain S, Khan MM, Imran MB. Effects of mobile phone radiation on serum testosterone in Wistar albino rats. Saudi Med J. 31(8):869-873, 2010.

OBJECTIVE: To investigate the effects of electromagnetic field radiation generated by mobile phones on serum testosterone levels in Wistar albino rats. **METHODS:** This experimental interventional control study was conducted in the Department of Physiology, College of Medicine, King Saud University, Riyadh, Saudi Arabia during the period December 2006 to April 2008. A total of 34 male Albino rats [Wistar strain], 2 months of age, weighing 150-160 gm were used for the experiment. These animals were divided into 3 groups. The first group containing 6 rats was assigned as a control group. The second group containing 14 rats was exposed to mobile phone radiation for 30 minutes daily and the third group containing 14 rats was exposed to mobile phone radiation for 60 minutes daily for the total period of 3 months. At the end of experimental period, blood was collected into the container, and serum testosterone was analyzed using double-antibody radioimmunoassay method by Coat-A-Count. **RESULTS:** Exposure to mobile phone radiation for 60 minutes/day for the total period of 3 months significantly decrease the serum testosterone level [$p=0.028$] in Wistar Albino rats compared to their matched control. **CONCLUSION:** Long-term exposure to mobile phone radiation leads to reduction in serum testosterone levels. Testosterone is a primary male gender hormone and any change in the normal levels may be devastating for reproductive and general health.

Gorpinchenko I, Nikitin O, Banyra O, Shulyak A. The influence of direct mobile phone radiation on sperm quality. Cent European J Urol. 67(1):65-71, 2014.

INTRODUCTION: It is impossible to imagine a modern socially-active man who does not use mobile devices and/or computers with Wi-Fi function. The effect of mobile phone radiation on male fertility is the subject of recent interest and investigations. The aim of

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this study was to investigate the direct in vitro influence of mobile phone radiation on sperm DNA fragmentation and motility parameters in healthy subjects with normozoospermia. **MATERIAL AND METHODS:** 32 healthy men with normal semen parameters were selected for the study. Each sperm sample was divided into two equal portions (A and B). Portions A of all involved men were placed for 5 hours in a thermostat, and portions B were placed into a second thermostat for the same period of time, where a mobile phone in standby/talk mode was placed. After 5 hours of incubation the sperm samples from both thermostats were re-evaluated regarding basic motility parameters. The presence of DNA fragmentation in both A and B portions of each sample was determined each hour using a standard sperm chromatin dispersion test. **RESULTS:** The number of spermatozoa with progressive movement in the group, influenced by electromagnetic radiation, is statistically lower than the number of spermatozoa with progressive movement in the group under no effect of the mobile phone. The number of non-progressive movement spermatozoa was significantly higher in the group, which was influenced by cell phone radiation. The DNA fragmentation was also significantly higher in this group. **CONCLUSIONS:** A correlation exists between mobile phone radiation exposure, DNA-fragmentation level and decreased sperm motility.

Ghanbari M, Mortazavi SB, Khavanin A, Khazaei M. The Effects of Cell Phone Waves (900 MHz-GSM Band) on Sperm Parameters and Total Antioxidant Capacity in Rats. Int J Fertil Steril. 7(1):21-28, 2013.

BACKGROUND: There is tremendous concern regarding the possible adverse effects of cell phone microwaves. Contradictory results, however, have been reported for the effects of these waves on the body. In the present study, the effect of cell phone microwaves on sperm parameters and total antioxidant capacity was investigated with regard to the duration of exposure and the frequency of these waves. **MATERIALS AND METHODS:** This experimental study was performed on 28 adult male Wistar rats (200-250 g). The animals were randomly assigned to four groups (n=7): i. control; ii. two-week exposure to cell phone-simulated waves; iii. three-week exposure to cell phonesimulated waves; and iv. two-week exposure to cell phone antenna waves. In all groups, sperm analysis was performed based on standard methods and we determined the mean sperm total antioxidant capacity according to the ferric reducing ability of plasma (FRAP) method. Data were analyzed by one-way ANOVA followed by Tukey's test using SPSS version 16 software. **RESULTS:** The results indicated that sperm viability, motility, and total antioxidant capacity in all exposure groups decreased significantly compared to the control group ($p < 0.05$). Increasing the duration of exposure from 2 to 3 weeks caused a statistically significant decrease in sperm viability and motility ($p < 0.05$). **CONCLUSION:** Exposure to cell phone waves can decrease sperm viability and motility in rats. These waves can also decrease sperm total antioxidant capacity in rats and result in oxidative stress.

Ozguner M, Koyu A, Cesur G, Ural M, Ozguner F, Gokcimen A, Delibas N. Biological and morphological effects on the reproductive organ of rats after exposure to

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electromagnetic field. Saudi Med J. 26(3):405-410, 2005.

OBJECTIVE: The biological effect of electromagnetic field (EMF) emitted from mobile phones is a current debate and still a controversial issue. Therefore, little is known on the possible adverse effects on reproduction as mobile phone bio-effects are only a very recent concern. The aim of this experimental study was to determine the biological and morphological effects of 900 MHz radiofrequency (RF) EMF on rat testes. **METHODS:** The study was performed in the Physiology and Histology Research Laboratories of Suleyman Demirel University, Faculty of Medicine, Isparta, Turkey in May 2004. Twenty adult male Sprague-Dawley rats weighing 270 - 320 gm were randomized into 2 groups of 10 animals: Group I (control group) was not exposed to EMF and Group II (EMF group) was exposed to 30 minutes per day, 5 days a week for 4 weeks to 900 MHz EMF. Testes tissues were submitted for histologic and morphologic examination. Testicular biopsy score count and the percentage of interstitial tissue to the entire testicular tissue were registered. Serum testosterone, plasma luteinizing hormone (LH) and follicle stimulating hormone (FSH) levels were assayed biochemically. **RESULTS:** The weight of testes, testicular biopsy score count and the percentage of interstitial tissue to the entire testicular tissue were not significantly different in EMF group compared to the control group. However, the diameter of the seminiferous tubules and the mean height of the germinal epithelium were significantly decreased in EMF group ($p < 0.05$). There was a significant decrease in serum total testosterone level in EMF group ($p < 0.05$). Therefore, there was an insignificant decrease in plasma LH and FSH levels in EMF group compared to the control group ($p > 0.05$). **CONCLUSION:** The biological and morphological effects resulting from 900 MHz RF EMF exposure lends no support to suggestions of adverse effect on spermatogenesis, and on germinal epithelium. Therefore, testicular morphologic alterations may possibly be due to hormonal changes.

Meo SA, Arif M, Rashied S, Khan MM, Vohra MS, Usmani AM, Imran MB, Al-Drees AM. Hypospermatogenesis and spermatozoa maturation arrest in rats induced by mobile phone radiation. J Coll Physicians Surg Pak. 21(5):262-265, 2011.

Abstract. Objective: To determine the morphological changes induced by mobile phone radiation in the testis of Wistar albino rats. Study Design: Cohort study. Place and Duration of Study: Department of Physiology, College of Medicine, King Saud University, Riyadh, Saudi Arabia, from April 2007 to June 2008. Methodology: Forty male Wistar albino rats were divided in three groups. First group of eight served as the control. The second group [group B, $n=16$] was exposed to mobile phone radiation for 30 minutes/day and the third group [group C, $n=16$] was exposed to mobile phone radiation for 60 minutes/day for a total period of 3 months. Morphological changes in the testes induced by mobile phone radiations were observed under a light microscope. Results: Exposure to mobile phone radiation for 60 minutes/day caused 18.75% hypospermatogenesis and 18.75% maturation arrest in the testis of albino rats compared to matched controls. However, no abnormal findings were observed in albino rats that were exposed to mobile phone radiation for 30 minutes/day for a total period of 3 months. Conclusion: Long-term exposure to mobile phone radiation can cause hypospermatogenesis and maturation arrest in the spermatozoa in the testis of Wistar

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albino rats.

Meo SA, Arif M, Rashied S, Khan MM, Vohra MS, Usmani AM, Imran MB, Al-Drees AM. Hypospermatogenesis and spermatozoa maturation arrest in rats induced by mobile phone radiation. J Coll Physicians Surg Pak. 21(5):262-265, 2011.

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Gutschi T, Mohamad Al-Ali B, Shamloul R, Pummer K, Trummer H. Impact of cell phone use on men's semen parameters. Andrologia. 43(5):312-316, 2011.

The objective of the present retrospective study was to report our experience concerning the effects of cell phone usage on semen parameters. We examined 2110 men attending our infertility clinic from 1993 to October 2007. Semen analysis was performed in all patients. Serum free testosterone (T), follicle stimulating hormone (FSH), luteinising hormone (LH) and prolactin (PRL) were collected from all patients. The information on cell phone use of the patients was recorded and the subjects were divided into two groups according to their cell phone use: group A: cell phone use (n = 991); group B: no use (n = 1119). Significant difference was observed in sperm morphology between the two groups. In the patients of group A, 68.0% of the spermatozoa featured a pathological morphology compared to only 58.1% in the subjects of group B. Patients with cell phone usage showed significantly higher T and lower LH levels than those who did not use cell phone. No significant difference between the two groups was observed regarding FSH and PRL values. Our results showed that cell phone use negatively affects sperm quality in men. Further studies with a careful design are needed to determine the effect of cell phone use on male fertility.

Gul A, Celebi H, Uğraş S. The effects of microwave emitted by cellular phones on ovarian follicles in rats. Arch Gynecol Obstet. 280(5):729-733, 2009.

OBJECTIVE: The aim of this study was to investigate whether there were any toxic effects of microwaves of cellular phones on ovaries in rats. METHODS: In this study, 82

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female pups of rats, aged 21 days (43 in the study group and 39 in the control group) were used. Pregnant rats in the study group were exposed to mobile phones that were placed beneath the polypropylene cages during the whole period of pregnancy. The cage was free from all kinds of materials, which could affect electromagnetic fields. A mobile phone in a standby position for 11 h and 45 min was turned on to speech position for 15 min every 12 h and the battery was charged continuously. On the 21st day after the delivery, the female rat pups were killed and the right ovaries were removed. The volumes of the ovaries were measured and the number of follicles in every tenth section was counted. RESULTS: The analysis revealed that in the study group, the number of follicles was lower than that in the control group. The decreased number of follicles in pups exposed to mobile phone microwaves suggest that intrauterine exposure has toxic effects on ovaries. CONCLUSION: We suggest that the microwaves of mobile phones might decrease the number of follicles in rats by several known and, no doubt, countless unknown mechanisms.

Lukac N, Massanyi P, Roychoudhury S, Capcarova M, Tvrda E, Knazicka Z, Kolesarova A, Danko J. In vitro effects of radiofrequency electromagnetic waves on bovine spermatozoa motility. J Environ Sci Health A Tox Hazard Subst Environ Eng. 46(12):1417-1423, 2011.

In this study the effects of 1800 MHz GSM-like radiofrequency electromagnetic waves (RF-EMW) exposure on bovine semen was monitored. The experimental samples were analyzed in vitro in four time periods (0, 30, 120 and 420 min) and compared with unexposed samples (control). Spermatozoa motility was determined by computer assisted semen analyzer (CASA). Evaluation of the percentage of motile spermatozoa showed significant ($P < 0.001$) decrease in experimental groups after 120 and 420 min of culture when exposed to microwaves, in comparison to control. Similar spermatozoa motility inhibition was detected for the percentage of progressively motile spermatozoa, too. Average path distance decreased significantly ($p < 0.001$) in experimental groups after 30 and 420 min of culture. Path velocity increased in the experimental groups exposed to RF-EMW after 30 minutes of culture, but subsequently decreased after 420 min of culture, in comparison to control. This indicates a possible initial stimulation and subsequent velocity inhibition of bovine spermatozoa under RF-EMW exposure. Changes in spermatozoa motility were also detected for some fine parameters, too. A significant decrease ($P < 0.001$) was noted for amplitude of lateral head displacement in the experimental group after 420 minutes of culture. Detailed in vitro motility analysis of bovine spermatozoa exposed to microwave radiation suggested that the parameters of path and velocity at the beginning of the culture significantly increase, but after longer culture (420 minutes) a significant decrease occur in the experimental group as compared to control. In general, results of this experiment indicate a negative time-dependent effect of 1800 MHz RF-EMW radiation on bovine spermatozoa motility.

Kilgallon SJ, Simmons LW. Image content influences men's semen quality. Biol Lett 1:252-255, 2005.

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There is increasing evidence from non-human animals that males adjust their ejaculation expenditure according to the risk of sperm competition. In this study we show that, after controlling for lifestyle factors known to influence semen quality, human males viewing images depicting sperm competition had a higher percentage of motile sperm in their ejaculates. Many lifestyle variables were confirmed to influence semen quality, including the recent suggestion that storage of mobile phones close to the testes can decrease semen quality.

Liu C, Gao P, Xu SC, Wang Y, Chen CH, He MD, Yu ZP, Zhang L, Zhou Z. Mobile phone radiation induces mode-dependent DNA damage in a mouse spermatocyte-derived cell line: a protective role of melatonin. Int J Radiat Biol. 2013 Aug 19. [Epub ahead of print]

Purpose: To evaluate whether exposure to mobile phone radiation (MPR) can induce DNA damage in male germ cells. Materials and methods: A mouse spermatocyte-derived GC-2 cell line was exposed to a commercial mobile phone handset once every 20 minutes in standby, listen, dialed or dialing modes for 24 h. DNA damage was determined using an alkaline comet assay. Results: The levels of DNA damage were significantly increased following exposure to MPR in the listen, dialed and dialing modes. Moreover, there were significantly higher increases in the dialed and dialing modes than in the listen mode. Interestingly, these results were consistent with the radiation intensities of these modes. However, the DNA damage effects of MPR in the dialing mode were efficiently attenuated by melatonin pretreatment. Conclusions: These results regarding mode-dependent DNA damage have important implications for the safety of inappropriate mobile phone use by males of reproductive age and also suggest a simple preventive measure, keeping our body from mobile phones as far away as possible, not only during conversations but during "dialed" and "dialing" operation modes as well. Since the "dialed" mode is actually part of the standby mode, mobile phones should be kept at a safe distance from our body even during standby operation. Furthermore, the protective role of melatonin suggests that it may be a promising pharmacological candidate for preventing mobile phone use-related reproductive impairments.

Liu K, Zhang G, Wang Z, Liu Y, Dong J, Dong X, Liu J, Cao J, Ao L, Zhang S. The protective effect of autophagy on mouse spermatocyte derived cells exposure to 1800MHz radiofrequency electromagnetic radiation. Toxicol Lett. 2014 May 8. pii: S0378-4274(14)00195-7. doi: 10.1016/j.toxlet.2014.05.004. [Epub ahead of print]

The increasing exposure to radiofrequency (RF) radiation emitted from mobile phone use has raised public concern regarding the biological effects of RF exposure on the male reproductive system. Autophagy contributes to maintaining intracellular homeostasis under environmental stress. To clarify whether RF exposure could induce autophagy in the spermatocyte, mouse spermatocyte-derived cells (GC-2) were exposed to 1800MHz Global System for Mobile Communication (GSM) signals in GSM-Talk mode at specific absorption rate (SAR) values of 1 w/kg, 2w/kg or 4w/kg for 24h, respectively. The results indicated that the expression of LC3-II increased in a dose- and time-

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dependent manner with RF exposure, and showed a significant change at the SAR value of 4w/kg. The autophagosome formation and the occurrence of autophagy were further confirmed by GFP-LC3 transient transfection assay and transmission electron microscopy (TEM) analysis. Furthermore, the conversion of LC3-I to LC3-II was enhanced by co-treatment with Chloroquine (CQ), indicating autophagic flux could be enhanced by RF exposure. Intracellular ROS levels significantly increased in a dose- and time-dependent manner after cells were exposed to RF. Pretreatment with anti-oxidative NAC obviously decreased the conversion of LC3-I to LC3-II and attenuated the degradation of p62 induced by RF exposure. Meanwhile, phosphorylated extracellular-signal-regulated kinase (ERK) significantly increased after RF exposure at the SAR value of 2w/kg and 4w/kg. Moreover, we observed that RF exposure did not increase the percentage of apoptotic cells, but inhibition of autophagy could increase the percentage of apoptotic cells. These findings suggested that autophagy flux could be enhanced by 1800MHz GSM exposure (4w/kg), which is mediated by ROS generation. Autophagy may play an important role in preventing cells from apoptotic cell death under RF exposure stress.

Liu C, Duan W, Xu S, Chen C, He M, Zhang L, Yu Z, Zhou Z. Exposure to 1800 MHz radiofrequency electromagnetic radiation induces oxidative DNA base damage in a mouse spermatocyte-derived cell line. *Toxicol Lett* 218(1): 2-9, 2013.

Whether exposure to radiofrequency electromagnetic radiation (RF-EMR) emitted from mobile phones can induce DNA damage in male germ cells remains unclear. In this study, we conducted a 24 h intermittent exposure (5 min on and 10 min off) of a mouse spermatocyte-derived GC-2 cell line to 1800 MHz Global System for Mobile Communication (GSM) signals in GSM-Talk mode at specific absorption rates (SAR) of 1 W/kg, 2 W/kg or 4 W/kg. Subsequently, through the use of formamidopyrimidine DNA glycosylase (FPG) in a modified comet assay, we determined that the extent of DNA migration was significantly increased at a SAR of 4 W/kg. Flow cytometry analysis demonstrated that levels of the DNA adduct 8-oxoguanine (8-oxoG) were also increased at a SAR of 4 W/kg. These increases were concomitant with similar increases in the generation of reactive oxygen species (ROS); these phenomena were mitigated by co-treatment with the antioxidant α -tocopherol. However, no detectable DNA strand breakage was observed by the alkaline comet assay. Taking together, these findings may imply the novel possibility that RF-EMR with insufficient energy for the direct induction of DNA strand breaks may produce genotoxicity through oxidative DNA base damage in male germ cells.

Hancı H, Odacı E, Kaya H, Aliyazıcıoğlu Y, Turan I, Demir S, Colakoğlu S. The effect of prenatal exposure to 900-MHz electromagnetic field on the 21-old-day rat testicle. *Reprod Toxicol*. 42:203-209, 2013.

The aim of this study was to investigate the effect of exposure to a 900-MHz electromagnetic field (EMF) in the prenatal term on the 21-old-day rat testicle. Pregnant rats were divided into control (CG) and EMF (EMFG) groups. EMFG was exposed to 900-MHz EMF during days 13-21 of pregnancy. Newborn CG rats were obtained from the CG

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and newborn EMFG (NEMFG) rats from the EMFG. Testicles were extracted at postnatal day 21. Lipid peroxidation and DNA oxidation levels, apoptotic index and histopathological damage scores were compared. NEMFG rats exhibited irregularities in seminiferous tubule basal membrane and epithelium, immature germ cells in the lumen, and a decreased diameter in seminiferous tubules and thickness of epithelium. Apoptotic index, lipid peroxidation and DNA oxidation were higher in NEMFG rats than in NCG. 21-day-old rat testicles exposed to 900-MHz EMF in the prenatal term may be adversely affected, and this effect persists after birth.

Falzone N, Huyser C, Fourie F, Toivo T, Leszczynski D, Franken D. In vitro effect of pulsed 900 MHz GSM radiation on mitochondrial membrane potential and motility of human spermatozoa. *Bioelectromagnetics*.29(4):268-276, 2008.

Ejaculated, density purified, human spermatozoa were exposed to pulsed 900 MHz GSM mobile phone radiation at two specific absorption rate levels (SAR 2.0 and 5.7 W/kg) and compared with controls over time. Change in sperm mitochondrial membrane potential was analysed using flow cytometry. Sperm motility was determined by computer assisted sperm analysis (CASA). There was no effect of pulsed 900 MHz GSM radiation on mitochondrial membrane potential. This was also the case for all kinematic parameters assessed at a SAR of 2.0 W/kg. However, over time, the two kinematic parameters straight line velocity (VSL) and beat-cross frequency (BCF) were significantly impaired (P < 0.05) after the exposure at SAR 5.7 W/kg and no exposure by time interaction was present. This result should not be ascribed to thermal effects, due to the cooling methods employed in the RF chamber and temperature control within the incubator.

Dasdag, S, Ketani, MA, Akdag, Z, Ersay, AR, Sar,i I, Demirtas ,OC, Celik, MS, Whole-body microwave exposure emitted by cellular phones and testicular function of rats. *Urol Res* 27(3):219-223, 1999.

This study investigated whether there are adverse effects due to microwave exposure emitted by cellular phones in male rats. Eighteen Wistar Albino rats were separated into three groups, a sham group and two experimental groups. The rats were confined in Plexiglas cages and cellular phones were placed 0.5 cm under the cages. In the first experimental group, cellular phones were in standby position for 2 h. In the second experimental group, phones were turned to the speech position three times each for 1 min duration over 2 h. Rats in the first and second experimental groups were exposed to microwaves emitted by phones for 2 h/day for a duration of 1 month. After the last exposure the rats were killed. Brain, eyes, ears, liver, heart, lungs, stomach, kidneys, testes, small and large intestines and skin of the rats were observed histologically. The decrease of epididymal sperm counts in the speech groups were not found to be significant (P > 0.05). Differences in terms of normal and abnormal sperm forms were not observed (P > 0.05). Histological changes were especially observed in the testes of rats of the speech groups. Seminiferous tubular diameter of rat testes in the standby and speech groups was found to be lower than the sham group (P < 0.05). Rectal temperatures of rats in the speech group were found to be higher than the sham and standby groups (P < 0.05). The rectal temperatures of rats before

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and after exposure were also found to be significantly higher in the speech group ($P < 0.05$).
Specific absorption rate (SAR) was determined as 0.141 W/kg.

Chen L, Qin F, Chen Y, Sun J, Tong J. [Chronotoxicity of 1800 MHz microwave radiation on sex hormones and spermatogenesis in male mice]. *Wei Sheng Yan Jiu*. 43(1):110-115, 2014. [Article in Chinese]

OBJECTIVE: To study the chronotoxicity of 1800 MHz microwave radiation on the male reproductive system. METHODS: Sixty healthy male C57 mice with circadian rhythm in a 12:12 h light-dark photoperiod were divided into false radiation group (Sham) and microwave radiation (MR) group exposed to 1800 MHz RF at 208 microW/cm² power (SAR: 0.2221 W/kg) density at different zeitgeber times of a day (ZT01:00, ZT05:00, ZT09 : 00, ZT13: 00, ZT17 : 00, ZT21 : 00) for continuous 32 days with 2 h/d. The testicular sperm head was counted with a microscope, and serum testosterone (T) and estradiol (E2) levels were measured by ELISA method. RESULTS: Compared with the sham group, microwave radiation induced reduced level in testicular sperm head count and serum testosterone, while the level of serum estradiol increased. Also, the circadian rhythms of testicular sperm head count and estradiol disappeared after the microwave radiation. CONCLUSION: 1800 MHZ microwave radiation may disturb the level as well as circadian rhythmicity of the reproductive functions in male mice.

Celik S, Aridogan IA, Izol V, Erdoğan S, Polat S, Doran S. An Evaluation of the effects of long-term cell phone use on the testes via light and electron microscope analysis. *Urology*. 79(2):346-350, 2012

Abstract. OBJECTIVE: To investigate whether the low-intensity electromagnetic waves transmitted by cell phones cause histopathological or ultrastructural changes in the testes of rats. MATERIALS AND METHODS: Wistar-Kyoto male rats were placed into either a control group or a group that was exposed to an electromagnetic field (EMF). Two cell phones with Specific Absorption Rate values of 1.58 were placed and left off in cages that housed 15 rats included in the control group, and four cell phones were placed and left on in cages that housed 30 rats included in the experimental group. After 3 months, weights, seminiferous tubule diameters, and spermatogenic cell conditions of all testes of the rats were evaluated. One half of each testis was examined also under an electron microscope. RESULTS: No significant differences were observed between the testis weights, seminiferous tubule diameters, and histopathological evaluations between rats that had and had not been exposed to EMF. Electron microscope analysis revealed that the membrana propria thickness and the collagen fiber contents were increased and the capillary veins extended in the experimental group. Common vacuolization in the cytoplasm of the Sertoli cells, growth of electron-dense structures, and existence of large lipid droplets were noted as the remarkable findings of this study.

Al-Damegh MA. Rat testicular impairment induced by electromagnetic radiation from a conventional cellular telephone and the protective effects of the antioxidants vitamins C and E. *Clinics (Sao Paulo)*. 67(7):785-792, 2012.

OBJECTIVE: The aim of this study was to investigate the possible effects of electromagnetic

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radiation from conventional cellular phone use on the oxidant and antioxidant status in rat blood and testicular tissue and determine the possible protective role of vitamins C and E in preventing the detrimental effects of electromagnetic radiation on the testes. **MATERIALS AND METHODS:** The treatment groups were exposed to an electromagnetic field, electromagnetic field plus vitamin C (40 mg/kg/day) or electromagnetic field plus vitamin E (2.7 mg/kg/day). All groups were exposed to the same electromagnetic frequency for 15, 30, and 60 min daily for two weeks. **RESULTS:** There was a significant increase in the diameter of the seminiferous tubules with a disorganized seminiferous tubule sperm cycle interruption in the electromagnetism-exposed group. The serum and testicular tissue conjugated diene, lipid hydroperoxide, and catalase activities increased 3-fold, whereas the total serum and testicular tissue glutathione and glutathione peroxidase levels decreased 3-5 fold in the electromagnetism-exposed animals. **CONCLUSION:** Our results indicate that the adverse effect of the generated electromagnetic frequency had a negative impact on testicular architecture and enzymatic activity. This finding also indicated the possible role of vitamins C and E in mitigating the oxidative stress imposed on the testes and restoring normality to the testes.

Azadi Oskouyi E, Rajaei F, Safari Variani A, Sarokhani MR, Javadi A. Effects of microwaves (950 MHz mobile phone) on morphometric and apoptotic changes of rabbit epididymis. Andrologia. 2014 Jul 25. doi: 10.1111/and.12321. [Epub ahead of print]

The effect of mobile phone radiation on human reproduction system is still a matter of debate. In this study, 18 male rabbits were randomly divided into two experimental groups and one control group. Experimental groups received simulated microwaves with the frequency of 950 MHz and the output power of 3 and 6 watts for 2 weeks, 2 h a day. After a week of rest, the microscopic slides from the quada of the excised epididymis were prepared. Then, the diameter of epididymis, the height of epithelium and the number of apoptotic cells in epithelium in study groups were determined. The data were compared using spss software and one-way anova test. The epithelial height and diameter of the epididymis in 3 watt and 6 watt groups had a significant decrease compared to the control group ($P < 0.001$), while the testosterone level only in 6 watt group was significantly decreased compared to control group. The rate of apoptosis in the epithelial cells of the epididymis had a significant increase only in 6 watt group compared to the control group ($P < 0.001$). This study showed that the microwaves with the frequency of 950 MHz can have negative impacts on morphometric and apoptotic changes of rabbit epididymis.

Baste V, Riise T, Moen BE. Radiofrequency electromagnetic fields; male infertility and sex ratio of offspring. Eur J Epidemiol.23(5):369-377,2008.

Concern is growing about exposure to electromagnetic fields and male reproductive health. The authors performed a cross-sectional study among military men employed in the Royal Norwegian Navy, including information about work close to equipment emitting radiofrequency electromagnetic fields, one-year infertility, children and sex of

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the offspring. Among 10,497 respondents, 22% had worked close to high-frequency aeriols to a "high" or "very high" degree. Infertility increased significantly along with increasing self-reported exposure to radiofrequency electromagnetic fields. In a logistic regression, odds ratio (OR) for infertility among those who had worked closer than 10 m from high-frequency aeriols to a "very high" degree relative to those who reported no work near high-frequency aeriols was 1.86 (95% confidence interval (CI): 1.46-2.37), adjusted for age, smoking habits, alcohol consumption and exposure to organic solvents, welding and lead. Similar adjusted OR for those exposed to a "high", "some" and "low" degree were 1.93 (95% CI: 1.55-2.40), 1.52 (95% CI: 1.25-1.84), and 1.39 (95% CI: 1.15-1.68), respectively. In all age groups there were significant linear trends with higher prevalence of involuntary childlessness with higher self-reported exposure to radiofrequency fields. However, the degree of exposure to radiofrequency radiation and the number of children were not associated. For self-reported exposure both to high-frequency aeriols and communication equipment there were significant linear trends with lower ratio of boys to girls at birth when the father reported a higher degree of radiofrequency electromagnetic exposure.

Panagopoulos DJ, Margaritis LH. The identification of an intensity 'window' on the bioeffects of mobile telephony radiation. *Int J Radiat Biol.* 86(5):358-366, 2010.

Erratum in *Int J Radiat Biol.* 2010 Sep;86(9):809.

PURPOSE: The increased bioactivity 'windows' of GSM 900 and 1800 MHz radiations, (Global System for Mobile telecommunications) revealed recently by us and published in this issue, manifesting themselves as a maximum decrease in the reproductive capacity of the insect *Drosophila melanogaster*, were examined to discover whether they depend on the intensity of radiation-fields. **METHODS:** In each experiment, one group of insects were exposed to the GSM 900 or 1800 radiation at 30 or 20 cm distances, respectively, from the antenna of a mobile phone, where the bioactivity 'window' appears for each type of radiation and another group was exposed at 8 or 5 cm, respectively, behind a metal grid, shielding both microwave radiation and the extremely low frequency (ELF) electric and magnetic fields for both types of radiation in a way that radiation and field intensities were roughly equal between the two groups. Then the effect on reproductive capacity was compared between groups for each type of radiation. **RESULTS:** The decrease in the reproductive capacity did not differ significantly between the two groups. **CONCLUSIONS:** The bioactivity window seems to be due to the intensity of radiation-field (10 microW/cm², 0.6-0.7 V/m) at 30 or 20 cm from the GSM 900 or 1800 mobile phone antenna, respectively

Panagopoulos DJ, Margaritis LH. The effect of exposure duration on the biological activity of mobile telephony radiation. *Mutat Res*699(1-2):17-22,2010.

In the present experiments we studied the effects of different durations of a single, (continuous), daily exposure, ranging from 1min up to 21min, to the two established systems of digital mobile telephony radiation that are commonly used in Europe, viz. GSM 900MHz (Global System for Mobile telecommunications) and DCS 1800MHz (Digital Cellular System - referred to also as GSM 1800MHz), on a well-tested biological

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model, the reproductive capacity of the insect *Drosophila melanogaster*. The insects were exposed to each type of radiation at an intensity of about 10μW/cm(2), corresponding to a distance of 20cm or 30cm from the antenna of a DCS 1800 or a GSM 900 mobile phone handset, respectively. At these distances the bioactivity of mobile telephony radiation was found to be at a maximum due to the existence of a "window" of increased bioactivity around this value, as we have proposed recently [1-4]. The results show that the reproductive capacity decreases almost linearly with increasing exposure duration to both GSM 900 and DCS 1800 radiation, suggesting that short-term exposures to these radiations have cumulative effects on living organisms. Additionally, our results show again that GSM 900MHz radiation is slightly more bioactive than DCS 1800MHz radiation, at the same exposure durations and under equal radiation intensities, as shown in our previous experiments [5].

Panagopoulos DJ. Effect of microwave exposure on the ovarian development of *Drosophila melanogaster*. *Cell Biochem Biophys*. 63(2):121-132, 2012.

In the present experiments the effect of GSM radiation on ovarian development of virgin *Drosophila melanogaster* female insects was studied. Newly emerged adult female flies were collected and divided into separate identical groups. After the a lapse of certain number of hours-different for each group-the insects (exposed and sham-exposed) were dissected and their intact ovaries were collected and photographed under an optical microscope with the same magnification. The size of the ovaries was compared between exposed and sham-exposed virgin female insects, during the time needed for the completion of oogenesis and maturation of the first eggs in the ovarioles. Immediately after the intact ovaries were photographed, they were further dissected into individual ovarioles and treated for TUNEL and acridine-orange assays to determine the degree of DNA damage in the egg chamber cells. The study showed that the ovarian size of the exposed insects is significantly smaller than that of the corresponding sham-exposed insects, due to destruction of egg chambers by the GSM radiation, after DNA damage and consequent cell death induction in the egg chamber cells of the virgin females as shown in previous experiments on inseminated females. The difference in ovarian size between sham-exposed and exposed virgin female flies becomes most evident 39-45 h after eclosion when the first eggs within the ovaries are at the late vitellogenic and post-vitellogenic stages (mid-late oogenesis). More than 45 h after eclosion, the difference in ovarian size decreases, as the first mature eggs of the sham-exposed insects are leaving the ovaries and are laid.

Forgacs Z, Somosy Z, Kubinyi G, Bakos J, Hudak A, Surjan A, Thuroczy G. Effect of whole-body 1800MHz GSM-like microwave exposure on testicular steroidogenesis and histology in mice. *Reprod Toxicol*.22(1):111-117, 2006.

The aim of our study was to evaluate the possible effects of whole-body 1800MHz GSM-like microwave exposure on male reproduction. After repeated exposure of mice to microwaves at 0.018-0.023W/kg whole-body specific energy absorption rate (SAR) an elevated serum testosterone level was measured, but no microwave exposure related histopathological alteration could be detected in the reproductive organs. The in vitro

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steroidogenic response of 48h Leydig cell cultures obtained from exposed animals did not differ from the controls, suggesting that Leydig cells were not the primary targets of the applied microwave exposure or direct action of microwaves on Leydig cells was temporary only. In exposed animals the red blood cell count and volume of packed red cells were also increased. Further investigations are required to clarify the mechanism of action of the applied microwave exposure on male mice, as well as to establish the biological significance of the observed phenomena.

Neurological Effects

Ntzouni MP, Stamatakis A, Stylianopoulou F, Margaritis LH. Short-term memory in mice is affected by mobile phone radiation. *Pathophysiology*. 18(3):193-199, 2011.

Abstract. The effects of mobile phone electromagnetic fields (EMFs) were studied on a non-spatial memory task (Object Recognition Task - ORT) that requires entorhinal cortex function. The task was applied to three groups of mice *Mus musculus* C57BL/6 (exposed, sham-exposed and control) combined with 3 different radiation exposure protocols. In the first protocol designated "acute exposure", mice 45 days old (PND45 - postnatal day 45) were exposed to mobile phone (MP) radiation (SAR value 0.22W/kg) during the habituation, the training and the test sessions of the ORT, but not during the 10min inter-trial interval (ITI) where consolidation of stored object information takes place. On the second protocol designated "chronic exposure-I", the same mice were exposed for 17 days for 90min/per day starting at PND55 to the same MP radiation. ORT recognition memory was performed at PND72 with radiation present only during the ITI phase. In the third protocol designated "chronic exposure-II", mice continued to be exposed daily under the same conditions up to PND86 having received radiation for 31 days. One day later the ORT test was performed without irradiation present in any of the sessions. The ORT-derived discrimination indices in all three exposure protocols revealed a major effect on the "chronic exposure-I" suggesting a possible severe interaction of EMF with the consolidation phase of recognition memory processes. This may imply that the primary EMF target may be the information transfer pathway connecting the entorhinal-parahippocampal regions which participate in the ORT memory task.

Yan JG, Agresti M, Zhang LL, Yan Y, Matloub HS. Upregulation of specific mRNA levels in rat brain after cell phone exposure. *Electromagn Biol Med*. 27(2):147-154, 2008.

Adult Sprague-Dawley rats were exposed to regular cell phones for 6 h per day for 126 days (18 weeks). RT-PCR was used to investigate the changes in levels of mRNA synthesis of several injury-associated proteins. Calcium ATPase, Neural Cell Adhesion Molecule, Neural Growth Factor, and Vascular Endothelial Growth Factor were evaluated. The results showed statistically significant mRNA up-regulation of these proteins in the brains of rats exposed to cell phone radiation. These results indicate that relative chronic exposure to cell phone microwave radiation may result in cumulative injuries that could eventually lead to clinically significant neurological damage.

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Hocking B, Westerman R, Neurological abnormalities associated with Mobile phone use. Occup Med 50: 366-368, 2000.

Dysaesthesiae of the scalp after mobile phone use have been previously reported but the pathological basis of these symptoms has been unclear. We report finding a neurological abnormality in a patient after prolonged use of a mobile phone. He had permanent unilateral dysaesthesiae of the scalp, slight loss of sensation, and abnormalities on current perception threshold testing of cervical and trigeminal nerves. A neurologist found no other disease. The implications regarding health effects of mobile phones and radio-frequency radiation is discussed.

Deshmukh PS, Banerjee BD, Abegaonkar MP, Megha K, Ahmed RS, Tripathi AK, Mediratta PK. Effect of low level microwave radiation exposure on cognitive function and oxidative stress in rats. Indian J Biochem Biophys. 50(2):114-119, 2013.

Use of wireless communicating devices is increasing at an exponential rate in present time and is raising serious concerns about possible adverse effects of microwave (MW) radiation emitted from these devices on human health. The present study aimed to evaluate the effects of 900 MHz MW radiation exposure on cognitive function and oxidative stress in blood of Fischer rats. Animals were divided into two groups (6 animals/group): Group I (MW-exposed) and Group II (Sham-exposed). Animals were subjected to MW exposure (Frequency 900 MHz; specific absorption rate 8.4738×10^{-5} W/kg) in Gigahertz transverse electromagnetic cell (GTEM) for 30 days (2 h/day, 5 days/week). Subsequently, cognitive function and oxidative stress parameters were examined for each group. Results showed significant impairment in cognitive function and increase in oxidative stress, as evidenced by the increase in levels of MDA (a marker of lipid peroxidation) and protein carbonyl (a marker of protein oxidation) and unaltered GSH content in blood. Thus, the study demonstrated that low level MW radiation had significant effect on cognitive function and was also capable of leading to oxidative stress.

Maier R, Greter SE, Maier N. Effects of pulsed electromagnetic fields on cognitive processes - a pilot study on pulsed field interference with cognitive regeneration. Acta Neurol Scand. 110(1):46-52, 2004.

BACKGROUND: Due to the ubiquitous use of cellular phones much has been speculated on secondary effects of electromagnetic irradiation emitted by those. Additionally, several studies have reported vegetative alterations as well as effects on the neuronal and molecular levels in humans. Here, using a psycho-physiological test paradigm, we examined effects of exposure to pulsed electromagnetic fields on cognitive performance. MATERIALS AND METHODS: In 11 volunteers, we tested cognitive processing under field exposure (GSM standard) and under field-free conditions. To examine the hypothesized effect of pulsed fields, we applied an auditory discrimination task and determined the participant's current 'Order Threshold' value. Following a first test cycle, the volunteers had to relax for 50 min while being, or not, exposed to pulsed electromagnetic fields. Subsequently, the test was repeated. Data acquired before and after the resting phase were compared from both experimental conditions. RESULTS:

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We found that nine of the 11 test participants (81.8%) showed worse results in their auditory discrimination performance upon field exposure as compared with control conditions. Group data comparison revealed a statistical significance of $P = 0.0105$. CONCLUSION: We could show that the participants' cognitive performance was impaired after exposure to pulsed electromagnetic fields. With regard to this finding, we recommend that the use of cellular phones should be restricted generally and in particular in respect of physical hazard of high-risk groups, e.g. elderly, children and ill people.

Maier R, Greter SE, Maier N. Effects of pulsed electromagnetic fields on cognitive processes - a pilot study on pulsed field interference with cognitive regeneration. Acta Neurol Scand. 110(1):46-52, 2004.

BACKGROUND: Due to the ubiquitous use of cellular phones much has been speculated on secondary effects of electromagnetic irradiation emitted by those. Additionally, several studies have reported vegetative alterations as well as effects on the neuronal and molecular levels in humans. Here, using a psycho-physiological test paradigm, we examined effects of exposure to pulsed electromagnetic fields on cognitive performance. MATERIALS AND METHODS: In 11 volunteers, we tested cognitive processing under field exposure (GSM standard) and under field-free conditions. To examine the hypothesized effect of pulsed fields, we applied an auditory discrimination task and determined the participant's current 'Order Threshold' value. Following a first test cycle, the volunteers had to relax for 50 min while being, or not, exposed to pulsed electromagnetic fields. Subsequently, the test was repeated. Data acquired before and after the resting phase were compared from both experimental conditions. RESULTS: We found that nine of the 11 test participants (81.8%) showed worse results in their auditory discrimination performance upon field exposure as compared with control conditions. Group data comparison revealed a statistical significance of $P = 0.0105$. CONCLUSION: We could show that the participants' cognitive performance was impaired after exposure to pulsed electromagnetic fields. With regard to this finding, we recommend that the use of cellular phones should be restricted generally and in particular in respect of physical hazard of high-risk groups, e.g. elderly, children and ill people.

Hocking B, Westerman R. Neurological effects of radiofrequency radiation. Occup Med (Lond) 53(2):123-127, 2003.

BACKGROUND: The health effects of radiofrequency radiation (RFR) and the adequacy of the safety standards are a subject of debate. One source of human data is case reports regarding peripheral neurological effects of RFR, mainly noxious sensations or dysaesthesiae. Aim To investigate health effects, neurophysiological mechanisms and safety levels for RFR. METHODS: We conducted a literature search for case reports and case series associated with mobile phone technology as well as other RFR sources using specific search terms on PubMed. RESULTS: We identified 11 original articles detailing case reports or case series and matching the search criteria. Five of the identified papers were written by at least one of the authors (B.H. or R.W.). CONCLUSIONS: Cases have

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arisen after exposure to much of the radiofrequency range. In some cases, symptoms are transitory but lasting in others. After very high exposures, nerves may be grossly injured. After lower exposures, which may result in dysaesthesia, ordinary nerve conduction studies find no abnormality but current perception threshold studies have found abnormalities. Only a small proportion of similarly exposed people develop symptoms. The role of modulations needs clarification. Some of these observations are not consistent with the prevailing hypothesis that all health effects of RFR arise from thermal mechanisms.

Nittby H, Grafström G, Tian DP, Malmgren L, Brun A, Persson BR, Salford LG, Eberhardt J. Cognitive impairment in rats after long-term exposure to GSM-900 mobile phone radiation. *Bioelectromagnetics*. 29:219-232, 2008.

Considering the frequent use of mobile phones, we have directed attention to possible implications on cognitive functions. In this study we investigated in a rat model the long-term effects of protracted exposure to Global System for Mobile Communication-900 MHz (GSM-900) radiation. Out of a total of 56 rats, 32 were exposed for 2 h each week for 55 weeks to radio-frequency electromagnetic radiation at different SAR levels (0.6 and 60 mW/kg at the initiation of the experimental period) emitted by a (GSM-900) test phone. Sixteen animals were sham exposed and eight animals were cage controls, which never left the animal house. After this protracted exposure, GSM-900 exposed rats were compared to sham exposed controls. Effects on exploratory behaviour were evaluated in the open-field test, in which no difference was seen. Effects on cognitive functions were evaluated in the episodic-like memory test. In our study, GSM exposed rats had impaired memory for objects and their temporal order of presentation, compared to sham exposed controls ($P = 0.02$). Detecting the place in which an object was presented was not affected by GSM exposure. Our results suggest significantly reduced memory functions in rats after GSM microwave exposure ($P = 0.02$).

Croft R, Chandler J, Burgess A, Barry R, Williams J, Clarke A. Acute mobile phone operation affects neural function in humans. *Clin Neurophysiol* 113(10):1623, 2002.

OBJECTIVES: Mobile phones (MP) are used extensively and yet little is known about the effects they may have on human physiology. There have been conflicting reports regarding the relation between MP use and the electroencephalogram (EEG). The present study suggests that this conflict may be due to methodological differences such as exposure durations, and tests whether exposure to an active MP affects EEG as a function of time. METHODS: Twenty-four subjects participated in a single-blind fully counterbalanced cross-over design, where both resting EEG and phase-locked neural responses to auditory stimuli were measured while a MP was either operating or turned off. RESULTS: MP exposure altered resting EEG, decreasing 1-4Hz activity (right hemisphere sites), and increasing 8-12Hz activity as a function of exposure duration (midline posterior sites). MP exposure also altered early phase-locked neural responses, attenuating the normal response decrement over time in the 4-8Hz band, decreasing the response in the 12-30Hz band globally and as a function of time, and increasing midline frontal and lateral posterior responses in the 30-45Hz band. CONCLUSIONS:

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Active MPs affect neural function in humans and do so as a function of exposure duration. The temporal nature of this effect may contribute to the lack of consistent results reported in the literature.

Eliyahu I, Luria R, Hareuveny R, Margaliot M, Meiran N, Shani G. Effects of radiofrequency radiation emitted by cellular telephones on the cognitive functions of humans. *Bioelectromagnetics*.27(2):119-126, 2006.

The present study examined the effects of exposure to Electromagnetic Radiation emitted by a standard GSM phone at 890 MHz on human cognitive functions. This study attempted to establish a connection between the exposure of a specific area of the brain and the cognitive functions associated with that area. A total of 36 healthy right-handed male subjects performed four distinct cognitive tasks: spatial item recognition, verbal item recognition, and two spatial compatibility tasks. Tasks were chosen according to the brain side they are assumed to activate. All subjects performed the tasks under three exposure conditions: right side, left side, and sham exposure. The phones were controlled by a base station simulator and operated at their full power. We have recorded the reaction times (RTs) and accuracy of the responses. The experiments consisted of two sections, of 1 h each, with a 5 min break in between. The tasks and the exposure regimes were counterbalanced. The results indicated that the exposure of the left side of the brain slows down the left-hand response time, in the second-later-part of the experiment. This effect was apparent in three of the four tasks, and was highly significant in only one of the tests. The exposure intensity and its duration exceeded the common exposure of cellular phone users.

Narayanan SN, Kumar RS, Potu BK, Nayak S, Mailankot M. Spatial memory performance of Wistar rats exposed to mobile phone. *Clinics*. 64(3):231-234, 2009.

INTRODUCTION: With the tremendous increase in number of mobile phone users world wide, the possible risks of this technology have become a serious concern. OBJECTIVE: We tested the effects of mobile phone exposure on spatial memory performance. MATERIALS AND METHODS: Male Wistar rats (10-12 weeks old) were exposed to 50 missed calls/day for 4 weeks from a GSM (900/1800 MHz) mobile phone in vibratory mode (no ring tone). After the experimental period, the animals were tested for spatial memory performance using the Morris water maze test. RESULTS: Both phone exposed and control animals showed a significant decrease in escape time with training. Phone exposed animals had significantly (approximately 3 times) higher mean latency to reach the target quadrant and spent significantly (approximately 2 times) less time in the target quadrant than age- and sex-matched controls. CONCLUSION: Mobile phone exposure affected the acquisition of learned responses in Wistar rats. This in turn points to the poor spatial navigation and the object place configurations of the phone-exposed animals.

Schneider J, Stangassinger M. Nonthermal Effects of Lifelong High-Frequency Electromagnetic Field Exposure on Social Memory Performance in Rats. *Behav Neurosci*. 2014 Jul 7. [Epub ahead of print]

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We are today surrounded almost constantly by high-frequency electromagnetic fields (EMFs) from mobile communications base stations. To date, however, there has been little concern regarding nonthermal effects of EMFs on cognition. In the present study, male and female rats were subjected to continuous far-field exposure to a frequency of 900-MHz (Global System for Mobile Communications [GSM]) or 1.966-GHz (Universal Mobile Telecommunications System [UMTS]) at 0.4 W/kg. Memory performance of adult EMF-exposed and sham-exposed female rats (at 6 months of age) and male rats (at 3 and 6 months of age) was tested using a social discrimination procedure. For this procedure, a target juvenile male was introduced to the subject's home cage for 4 min (Trial 1). After 30 min, the same target animal and a novel juvenile male were simultaneously presented to the subject for 4 min (Trial 2). Differences in sniffing duration to the familiar and novel target rats during Trial 2 were used to assess memory performance. EMF-exposed females exhibited no differences in sniffing duration compared with controls. In contrast, the sniffing durations of EMF-exposed males at 3 months of age were significantly affected. At 6 months of age, GSM-, but not UMTS-, exposed male adults showed a memory performance deficit. These findings provide new insight into the nonthermal effects of long-term high-frequency EMF exposure on memory.

Li H, Peng R, Wang C, Qiao S, Yong-Zou, Gao Y, Xu X, Wang S, Dong J, Zuo H, Li-Zhao, Zhou H, Wang L, Hu X. Alterations of cognitive function and 5-HT system in rats after long term microwave exposure. *Physiol Behav.* 2014 Dec 24. pii: S0031-9384(14)00663-5. doi: 10.1016/j.physbeh.2014.12.039. [Epub ahead of print]

The increased use of microwaves raises concerns about its impact on health including cognitive function in which neurotransmitter system plays an important role. In this study, we focused on the serotonergic system and evaluated the long term effects of chronic microwave radiation on cognition and correlated items. Wistar rats were exposed or sham exposed to 2.856GHz microwaves with the average power density of 5, 10, 20 or 30mW/cm² respectively for 6min three times a week up to 6weeks. At different time points after the last exposure, spatial learning and memory function, morphology structure of the hippocampus, electroencephalogram (EEG) and neurotransmitter content (amino acid and monoamine) of rats were tested. Above results raised our interest in serotonin system. Tryptophan hydroxylase 1 (TPH1) and monoamine oxidase (MAO), two important rate-limiting enzymes in serotonin synthesis and metabolic process respectively, were detected. Expressions of serotonin receptors including 5-HT_{1A}, 2A, 2C receptors were measured. We demonstrated that chronic exposure to microwave (2.856GHz, with the average power density of 5, 10, 20 and 30mW/cm²) could induce dose-dependent deficit of spatial learning and memory in rats accompanied with inhibition of brain electrical activity, the degeneration of hippocampus neurons, and the disturbance of neurotransmitters, among which the increase of 5-HT occurred as the main long-term change that the decrease of its metabolism partly contributed to. Besides, the variations of 5-HT_{1A}R and 5-HT_{2C}R expressions were also indicated. The results suggested that in the long-term way,

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chronic microwave exposure could induce cognitive deficit and 5-HT system may be involved in it.

Ntzouni MP, Skouroliahou A, Kostomitsopoulos N, Margaritis LH. Transient and cumulative memory impairments induced by GSM 1.8 GHz cell phone signal in a mouse model. Electromagn Biol Med. 2013 Jan 15. [Epub ahead of print]

This study was designed to investigate the transient and cumulative impairments in spatial and non-spatial memory of C57Bl/6J mice exposed to GSM 1.8 GHz signal for 90 min daily by a typical cellular (mobile) phone at a specific absorption rate value of 0.11 W/kg. Free-moving male mice 2 months old were irradiated in two experimental protocols, lasting for 66 and for 148 days respectively. Each protocol used three groups of animals (n = 8 each for exposed, sham exposed and controls) in combination with two behavioural paradigms, the object recognition task and the object location task sequentially applied at different time points. One-way analysis of variance revealed statistically significant impairments of both types of memory gradually accumulating, with more pronounced effects on the spatial memory. The impairments persisted even 2 weeks after interruption of the 8 weeks daily exposure, whereas the memory of mice as detected by both tasks showed a full recovery approximately 1 month later. Intermittent every other day exposure for 1 month had no effect on both types of memory. The data suggest that visual information processing mechanisms in hippocampus, perirhinal and entorhinal cortex are gradually malfunctioning upon long-term daily exposure, a phenotype that persists for at least 2 weeks after interruption of radiation, returning to normal memory performance levels 4 weeks later. It is postulated that cellular repair mechanisms are operating to eliminate the memory affecting molecules. The overall contribution of several possible mechanisms to the observed cumulative and transient impairments in spatial and non-spatial memory is discussed.

Vecchio F, Babiloni C, Ferreri F, Curcio G, Fini R, Del Percio C, Rossini PM. Mobile phone emission modulates interhemispheric functional coupling of EEG alpha rhythms. Eur J Neurosci. 25(6):1908-1913, 2007.

We tested the working hypothesis that electromagnetic fields from mobile phones (EMFs) affect interhemispheric synchronization of cerebral rhythms, an important physiological feature of information transfer into the brain. Ten subjects underwent two electroencephalographic (EEG) recordings, separated by 1 week, following a crossover double-blind paradigm in which they were exposed to a mobile phone signal (global system for mobile communications; GSM). The mobile phone was held on the left side of the subject head by a modified helmet, and orientated in the normal position for use over the ear. The microphone was orientated towards the corner of the mouth, and the antenna was near the head in the parietotemporal area. In addition, we positioned another similar phone (but without battery) on the right side of the helmet, to balance the weight and to prevent the subject localizing the side of GSM stimulation (and consequently lateralizing attention). In one session the exposure was real (GSM) while in the other it was Sham; both sessions lasted 45 min. Functional interhemispheric connectivity was modelled using the analysis of EEG spectral coherence between frontal, central and parietal electrode pairs. Individual EEG rhythms of interest were

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delta (about 2-4 Hz), theta (about 4-6 Hz), alpha 1 (about 6-8 Hz), alpha 2 (about 8-10 Hz) and alpha 3 (about 10-12 Hz). Results showed that, compared to Sham stimulation, GSM stimulation modulated the interhemispheric frontal and temporal coherence at alpha 2 and alpha 3 bands. The present results suggest that prolonged mobile phone emission affects not only the cortical activity but also the spread of neural synchronization conveyed by interhemispherical functional coupling of EEG rhythms.

Vecchio F, Babiloni C, Ferreri F, Buffo P, Cibelli G, Curcio G, Dijkman SV, Melgari JM, Giambattistelli F, Rossini PM. Mobile phone emission modulates inter-hemispheric functional coupling of EEG alpha rhythms in elderly compared to young subjects. Clin Neurophysiol. 121(2):163-171, 2010.

OBJECTIVE: It has been reported that GSM electromagnetic fields (GSM-EMFs) of mobile phones modulate - after a prolonged exposure - inter-hemispheric synchronization of temporal and frontal resting electroencephalographic (EEG) rhythms in normal young subjects [Vecchio et al., 2007]. Here we tested the hypothesis that this effect can vary on physiological aging as a sign of changes in the functional organization of cortical neural synchronization. **METHODS:** Eyes-closed resting EEG data were recorded in 16 healthy elderly subjects and 5 young subjects in the two conditions of the previous reference study. The GSM device was turned on (45min) in one condition and was turned off (45min) in the other condition. Spectral coherence evaluated the inter-hemispheric synchronization of EEG rhythms at the following bands: delta (about 2-4Hz), theta (about 4-6Hz), alpha 1 (about 6-8Hz), alpha 2 (about 8-10Hz), and alpha 3 (about 10-12Hz). The aging effects were investigated comparing the inter-hemispheric EEG coherence in the elderly subjects vs. a young group formed by 15 young subjects (10 young subjects of the reference study; Vecchio et al., 2007). **RESULTS:** Compared with the young subjects, the elderly subjects showed a statistically significant ($p < 0.001$) increment of the inter-hemispheric coherence of frontal and temporal alpha rhythms (about 8-12Hz) during the GSM condition. **CONCLUSIONS:** These results suggest that GSM-EMFs of a mobile phone affect inter-hemispheric synchronization of the dominant (alpha) EEG rhythms as a function of the physiological aging. **SIGNIFICANCE:** This study provides further evidence that physiological aging is related to changes in the functional organization of cortical neural synchronization.

Hocking B, Westerman R. Neurological changes induced by a mobile phone. Occup Med (Lond) 52(7):413-415, 2002.

Dysaesthesiae of the scalp after mobile phone use have been previously reported, but the basis for this has not been clear. We report a case of a 34-year-old journalist who complained of symptoms associated with use of a mobile phone. She agreed to a provocation study with her phone. Current perception threshold testing before and after exposure showed marked changes in the C-fibre nerves of the affected area compared with the opposite side. The case is supportive of a neurological basis for some cases of dysaesthesiae associated with mobile phone use.

Curcio G, Ferrara M, Moroni F, D'Inzeo G, Bertini M, De Gennaro L. Is the brain

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influenced by a phone call? An EEG study of resting wakefulness. Neurosci Res. 53(3):265-270, 2005.

We recorded the resting electroencephalogram of 20 healthy subjects in order to investigate the effect of electromagnetic field (EMF) exposure on EEG waking activity and its temporal development. The subjects were randomly assigned to two groups and exposed, in double-blind conditions, to a typical mobile phone signal (902.40MHz, modulated at 217Hz, with an average power of 0.25W) before or during the EEG recording session. The results show that, under real exposure as compared to baseline and sham conditions, EEG spectral power was influenced in some bins of the alpha band. This effect was greater when the EMF was on during the EEG recording session than before it. The present data lend further support to the idea that pulsed high-frequency electromagnetic fields can affect normal brain functioning, also if no conclusions can be drawn about the possible health effects.

Vecchio F, Tombini M, Buffo P, Assenza G, Pellegrino G, Benvenga A, Babiloni C, Rossini PM. Mobile phone emission increases inter-hemispheric functional coupling of electroencephalographic alpha rhythms in epileptic patients. Int J Psychophysiol.84(2):164-171, 2012.

It has been reported that GSM electromagnetic fields (GSM-EMFs) of mobile phones modulate - after a prolonged exposure - inter-hemispheric synchronization of temporal and frontal resting electroencephalographic (EEG) rhythms in normal young and elderly subjects (Vecchio et al., 2007, 2010). Here we tested the hypothesis that this can be even more evident in epileptic patients, who typically suffer from abnormal mechanisms governing synchronization of rhythmic firing of cortical neurons. Eyes-closed resting EEG data were recorded in ten patients affected by focal epilepsy in real and sham exposure conditions. These data were compared with those obtained from 15 age-matched normal subjects of the previous reference studies. The GSM device was turned on (45min) in the "GSM" condition and was turned off (45min) in the other condition ("sham"). The mobile phone was always positioned on the left side in both patients and control subjects. Spectral coherence evaluated the inter-hemispheric synchronization of EEG rhythms at the following frequency bands: delta (about 2-4Hz), theta (about 4-6Hz), alpha1 (about 6-8Hz), alpha2 (about 8-10Hz), and alpha3 (about 10-12Hz). The effects on the patients were investigated comparing the inter-hemispheric EEG coherence in the epileptic patients with the control group of subjects evaluated in the previous reference studies. Compared with the control subjects, epileptic patients showed a statistically significant higher inter-hemispheric coherence of temporal and frontal alpha rhythms (about 8-12Hz) in the GSM than "Sham" condition. These results suggest that GSM-EMFs of mobile phone may affect inter-hemispheric synchronization of the dominant (alpha) EEG rhythms in epileptic patients. If confirmed by future studies on a larger group of epilepsy patients, the modulation of the inter-hemispheric alpha coherence due to the GSM-EMFs could have clinical implications and be related to changes in cognitive-motor function.

Balikci K, Cem Ozcan I, Turgut-Balik D, Balik HH. A survey study on some neurological

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symptoms and sensations experienced by long term users of mobile phones. *Pathol Biol (Paris)*. 53(1):30-34, 2005.

A survey study was conducted to investigate the possible effects of mobile phone on headache, dizziness, extreme irritation, shaking in the hands, speaking falteringly, forgetfulness, neuro-psychological discomfort, increase in the carelessness, decrease of the reflex and clicking sound in the ears. There is no effect on dizziness, shaking in hands, speaking falteringly and neuro-psychological discomfort, but some statistical evidences are found that mobile phone may cause headache, extreme irritation, increase in the carelessness, forgetfulness, decrease of the reflex and clicking sound in the ears.

Vecsei Z, Csathó A, Thuróczy G, Hernádi I. Effect of a single 30 min UMTS mobile phone-like exposure on the thermal pain threshold of young healthy volunteers. *Bioelectromagnetics*. 2013 Jun 20. doi: 10.1002/bem.21801. [Epub ahead of print]

One of the most frequently investigated effects of radiofrequency electromagnetic fields (RF EMFs) on the behavior of complex biological systems is pain sensitivity. Despite the growing body of evidence of EMF-induced changes in pain sensation, there is no currently accepted experimental protocol for such provocation studies for the healthy human population. In the present study, therefore, we tested the effects of third generation Universal Mobile Telecommunications System (UMTS) RF EMF exposure on the thermal pain threshold (TPT) measured on the surface of the fingers of 20 young adult volunteers. The protocol was initially validated with a topical capsaicin treatment. The exposure time was 30 min and the genuine (or sham) signal was applied to the head through a patch antenna, where RF EMF specific absorption rate (SAR) values were controlled and kept constant at a level of 1.75 W/kg. Data were obtained using randomized, placebo-controlled trials in a double-blind manner. Subjective pain ratings were tested blockwise on a visual analogue rating scale (VAS). Compared to the control and sham conditions, the results provide evidence for intact TPT but a reduced desensitization effect between repeated stimulations within the individual blocks of trials, observable only on the contralateral side for the genuine UMTS exposure. Subjective pain perception (VAS) data indicated marginally decreased overall pain ratings in the genuine exposure condition only. The present results provide pioneering information about human pain sensation in relation to RF EMF exposure and thus may contribute to cover the existing gap between safety research and applied biomedical science targeting the potential biological effects of environmental RF EMFs.

Luria R, Eliyahu I, Hareuveny R, Margaliot M, Meiran N. Cognitive effects of radiation emitted by cellular phones: the influence of exposure side and time. *Bioelectromagnetics*. 30(3):198-204, 2009.

This study examined the time dependence effects of exposure to radiofrequency radiation (RFR) emitted by standard GSM cellular phones on the cognitive functions of humans. A total of 48 healthy right-handed male subjects performed a spatial working memory task (that required either a left-hand or a right-hand response) while being exposed to one of two GSM phones placed at both sides of the head. The subjects were

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randomly divided into three groups. Each group was exposed to one of three exposure conditions: left-side of the head, right-side, or sham-exposure. The experiment consisted of 12 blocks of trials. Response times (RTs) and accuracy of the responses were recorded. It was found that the average RT of the right-hand responses under left-side exposure condition was significantly longer than those of the right-side and sham-exposure groups averaged together during the first two time blocks. These results confirmed the existence of an effect of exposure on RT, as well as the fact that exposure duration (together with the responding hand and the side of exposure) may play an important role in producing detectable RFR effects on performance. Differences in these parameters might be the reason for the failure of certain studies to detect or replicate RFR effects.

Maskey D, Kim MJ. Immunohistochemical Localization of Brain-derived Neurotrophic Factor and Glial Cell Line-derived Neurotrophic Factor in the Superior Olivary Complex of Mice after Radiofrequency Exposure. Neuroscience Letters. 564:78-82, 2014.

Raising health concerns about the biological effects from radiofrequency exposure, even with conflicting results, has prompted calls for formulation of a guideline of the biological safety level. Given the close proximity between a mobile phone and the ear, it has been suggested that the central auditory system may be detrimentally influenced by radiofrequency exposure. In the auditory system, neurotrophins are important in the regulation of neuron survival, especially mammalian cochlear neurons. Neurotrophic factors like brain-derived neurotrophic factor (BDNF) and glial-derived neurotrophic factor (GDNF) present in the auditory system are responsible for the maintenance of auditory neurons. BDNF and GDNF may protect against acoustic trauma and prevent from hearing defect. The present study applied radiofrequency at a specific absorption rate (SAR) of 1.6 W/kg (E1.6) or 0 W/kg group to determine the distribution of BDNF and GDNF in the nuclei of superior olivary complex (SOC). In the E1.6 group, significant decrements of BDNF immunoreactivity (IR) were noted in the lateral superior olive, medial superior olive, superior paraolivary nucleus and medial nucleus of the trapezoid body. GDNF IR was also significantly decreased ($p < 0.001$) in all SOC nuclei of the E1.6 group. The decrease in the IR of these neurotrophic factors in the SOC of the E1.6 group suggests a detrimental effect of RF exposure in the auditory nuclei.

Qin F, Yuan H, Nie J, Cao Y, Tong J. [Effects of nano-selenium on cognition performance of mice exposed in 1800 MHz radiofrequency fields]. Wei Sheng Yan Jiu. 43(1):16-21, 2014. [Article in Chinese]

OBJECTIVE: To study the effects of nano-selenium (NSe) on cognition performance of mice exposed to 1800 MHz radiofrequency fields (RF). METHODS: Male mice were randomly divided into four groups, control and nano-Se low, middle and high dose groups (L, M, H). Each group was sub-divided into three groups, RF 0 min, RF 30 min and RF 120 min. Nano-se solution (2, 4 and 8 microg/ml) were administered to mice of L, M, H groups by intra-gastric injection respectively, 0.5 ml/d for 50 days, the conctral group were administered with distilled water. At the 21st day, the mice in RF subgroup were exposed to 208 microW/cm² 1800 MHz radiofrequency fields (0, 30 and 120 min/d

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respectively) for 30 days. The cognitive ability of the mice were tested with Y-maze. Further, the levels of MDA, GABA, Glu, Ach and the activities of CAT and GSH-Px in cerebra were measured. RESULTS: Significant impairments in learning and memory ($P < 0.05$) were observed in the RF 120 min group, and with reduction of the Ach level and the activities of CAT and GSH-Px and increase of the content of GABA, Glu and MDA in cerebrum. NSe enhanced cognitive performance of RF mice, decreased GABA, Glu and MDA levels, increased Ach levels, GSH-Px and CAT activities. CONCLUSION: NSe could improve cognitive impairments of mice exposed to RF, the mechanism of which might involve the increasing antioxidation, decreasing free radical content and the changes of cerebra neurotransmitters.

Fragopoulou AF, Miltiadous P, Stamatakis A, Stylianopoulou F, Koussoulakos SL, Margaritis LH. Whole body exposure with GSM 900MHz affects spatial memory in mice. *Pathophysiology*. 17(3):179-187,2010.

Extended work has been performed worldwide on the effects of mobile phone radiation upon rats' cognitive functions, however there is great controversy to the existence or not of deficits. The present work has been designed in order to test the effects of mobile phone radiation on spatial learning and memory in mice *Mus musculus* Balb/c using the Morris water maze (a hippocampal-dependent spatial memory task), since there is just one other study on mice with very low SAR level (0.05W/kg) showing no effects. We have applied a 2h daily dose of pulsed GSM 900MHz radiation from commercially available mobile phone for 4 days at SAR values ranging from 0.41 to 0.98W/kg. Statistical analysis revealed that during learning, exposed animals showed a deficit in transferring the acquired spatial information across training days (increased escape latency and distance swam, compared to the sham-exposed animals, on the first trial of training days 2-4). Moreover, during the memory probe-trial sham-exposed animals showed the expected preference for the target quadrant, while the exposed animals showed no preference, indicating that the exposed mice had deficits in consolidation and/or retrieval of the learned spatial information. Our results provide a basis for more thorough investigations considering reports on non-thermal effects of electromagnetic fields (EMFs).

Bouji M, Lecomte A, Hode Y, de Seze R, Villégier AS. Effects of 900 MHz radiofrequency on corticosterone, emotional memory and neuroinflammation in middle-aged rats. *Exp Gerontol*. 47(6):444-451, 2012.

The widespread use of mobile phones raises the question of the effects of electromagnetic fields (EMF, 900 MHz) on the brain. Previous studies reported increased levels of the glial fibrillary acidic protein (GFAP) in the rat's brain after a single exposure to 900 MHz global system for mobile (GSM) signal, suggesting a potential inflammatory process. While this result was obtained in adult rats, no data is currently available in older animals. Since the transition from middle-age to senescence is highly dependent on environment and lifestyle, we studied the reactivity of middle-aged brains to EMF exposure. We assessed the effects of a single 15 min GSM exposure (900 MHz; specific absorption rate (SAR)=6 W/kg) on GFAP expression in young adults (6

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week-old) and middle-aged rats (12 month-old). Brain interleukin (IL)-1 β and IL-6, plasmatic levels of corticosterone (CORT), and emotional memory were also assessed. Our data indicated that, in contrast to previously published work, acute GSM exposure did not induce astrocyte activation. Our results showed an IL-1 β increase in the olfactory bulb and enhanced contextual emotional memory in GSM-exposed middle-aged rats, and increased plasmatic levels of CORT in GSM-exposed young adults. Altogether, our data showed an age dependency of reactivity to GSM exposure in neuro-immunity, stress and behavioral parameters. Reproducing these effects and studying their mechanisms may allow a better understanding of mobile phone EMF effects on neurobiological parameters.

Masuda H, Hirata A, Kawai H, Wake K, Watanabe S, Arima T, Poullietier de Gannes F, Lagroye I, Veyret B. Local exposure of the rat cortex to radiofrequency electromagnetic fields increases local cerebral blood flow along with temperature. J Appl Physiol. 110(1):142-148, 2011.

Few studies have shown that local exposure to radiofrequency electromagnetic fields (RF) induces intensity-dependent physiological changes, especially in the brain. The aim of the present study was to detect reproducible responses to local RF exposure in the parietal cortex of anesthetized rats and to determine their dependence on RF intensity. The target cortex tissue was locally exposed to 2-GHz RF using a figure-eight loop antenna within a range of averaged specific absorption rates (10.5, 40.3, 130, and 263 W/kg averaged over 4.04 mg) in the target area. Local cerebral blood flow (CBF) and temperatures in three regions (target area, rectum, and calf hypodermis) were measured using optical fiber blood flow meters and thermometers during RF exposure. All parameters except for the calf hypodermis temperature increased significantly in exposed animals compared with sham-exposed ones during 18-min exposures. Dependence of parameter values on exposure intensity was analyzed using linear regression models. The elevation of local CBF was correlated with temperature rise in both target and rectum at the end of RF exposure. However, the local CBF elevation seemed to be elevated by the rise in target temperature, but not by that of the rectal temperature, in the early part of RF exposure or at low-intensity RF exposure. These findings suggest that local RF exposure of the rat cortex drives a regulation of CBF accompanied by a local temperature rise, and our findings may be helpful for discussing physiological changes in the local cortex region, which is locally exposed to RF.

Lovisolo GA, Giardino L, Calzaà L. Effect of radiofrequency electromagnetic field exposure on in vitro models of neurodegenerative disease. Bioelectromagnetics.30(7):564-72, 2009.

In this work we tested viability, proliferation, and vulnerability of neural cells, after continuous radiofrequency (RF) electromagnetic fields exposure (global system for mobile telecommunications (GSM) modulated 900 MHz signal at a specific absorption rate (SAR) of 1 W/kg and maximum duration 144 h) generated by transverse electromagnetic cells. We used two cellular systems, SN56 cholinergic for example, SN56 cholinergic cell line and rat primary cortical neurons, and well-known neurotoxic

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challenges, such as glutamate, 25-35AA beta-amyloid, and hydrogen peroxide. Exposure to RF did not change viability/proliferation rate of the SN56 cholinergic cells or viability of cortical neurons. Co-exposure to RF exacerbated neurotoxic effect of hydrogen peroxide in SN56, but not in primary cortical neurons, whereas no cooperative effects of RF with glutamate and 25-35AA beta-amyloid were found. These data suggest that only under particular circumstances exposure to GSM modulated, 900 MHz signal act as a co-stressor for oxidative damage of neural cells.

Yilmaz A, Yilmaz N, Serarslan Y, Aras M, Altas M, Ozgür T, Sefil F. The effects of mobile phones on apoptosis in cerebral tissue: an experimental study on rats. Eur Rev Med Pharmacol Sci. 18(7):992-1000, 2014.

INTRODUCTION: The concern about mobile phone effects is increasing as the number of users increasing too. Different studies have different results, so this topic is still open to discussion. Aim of this report was to investigate the effects of the mobile phones on the Bcl-2 gene and p53 proteins in rat brains. **MATERIALS AND METHODS:** In the study group of 10 rats; mobile phones that spread EMW at a frequency between 1900-2100 MHz and Specific Absorption Rate range between 0.005 W/kg and 0.288 W/kg (Dialing mode), 0.004 W/kg and 0.029 W/kg (Calling mode) were attached to rat ears for simulating usage in daily life for 7 times a day during 5 minutes (3 seconds dialing mode, 4 minutes and 47 seconds of calling mode) for a four week period. Sham group (n=10) rats were only immobilized without EMW exposure. Another group of rats (n=10) were counted as control without any application. immunohistopathological examination was performed for p53 and Bcl-2 expression. **RESULTS:** Immunohistopathological examinations revealed that the samples in the study group had more p53 and Bcl-2 positive stained cells and they were stained denser. In both evaluations, these differences between the study and control group were found statistically significant ($p < 0.003$); In Bcl-2 evaluation statistically significant difference was found between study and sham group to ($p < 0.005$); however, the p53 evaluation between the study and the sham group did not show any statistically significant difference ($p > 0.005$).

CONCLUSIONS: Our results showed that the electro-magnetic waves emitted by the mobile phones may have effect on apoptosis. Besides, obtained data revealed that more realistic application of mobile phones during experiments is more important as expected.

Del Vecchio G, Giuliani A, Fernandez M, Mesirca P, Bersani F, Pinto R, Ardoino L, Lovisolo GA, Giardino L, Calzà L. Continuous exposure to 900MHz GSM-modulated EMF alters morphological maturation of neural cells. Neurosci Lett. 455(3):173-177, 2009.

The effects of radiofrequency electromagnetic field (RF-EMF) exposure on neuronal phenotype maturation have been studied in two different in vitro models: murine SN56 cholinergic cell line and rat primary cortical neurons. The samples were exposed at a dose of 1W/kg at 900 MHz GSM modulated. The phenotype analysis was carried out at 48 and 72 h (24 and 48 h of SN56 cell line differentiation) or at 24, 72, 120 h (2, 4 and 6 days in vitro for cortical neurons) of exposure, on live and immunolabeled neurons, and

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included the morphological study of neurite emission, outgrowth and branching. Moreover, cortical neurons were studied to detect alterations in the expression pattern of cytoskeleton regulating factors, e.g. beta-thymosin, and of early genes, e.g. c-Fos and c-Jun through real-time PCR on mRNA extracted after 24h exposure to EMF. We found that RF-EMF exposure reduced the number of neurites generated by both cell systems, and this alteration correlates to increased expression of beta-thymosin mRNA.

Del Vecchio G, Giuliani A, Fernandez M, Mesirca P, Bersani F, Pinto R, Ardoino L, Lovisolo GA, Giardino L, Calzà L. Effect of radiofrequency electromagnetic field exposure on in vitro models of neurodegenerative disease. Bioelectromagnetics. 30(7):564-572, 2009.

In this work we tested viability, proliferation, and vulnerability of neural cells, after continuous radiofrequency (RF) electromagnetic fields exposure (global system for mobile telecommunications (GSM) modulated 900 MHz signal at a specific absorption rate (SAR) of 1 W/kg and maximum duration 144 h) generated by transverse electromagnetic cells. We used two cellular systems, SN56 cholinergic for example, SN56 cholinergic cell line and rat primary cortical neurons, and well-known neurotoxic challenges, such as glutamate, 25-35AA beta-amyloid, and hydrogen peroxide. Exposure to RF did not change viability/proliferation rate of the SN56 cholinergic cells or viability of cortical neurons. Co-exposure to RF exacerbated neurotoxic effect of hydrogen peroxide in SN56, but not in primary cortical neurons, whereas no cooperative effects of RF with glutamate and 25-35AA beta-amyloid were found. These data suggest that only under particular circumstances exposure to GSM modulated, 900 MHz signal act as a co-stressor for oxidative damage of neural cells.

Curcio G, Mazzucchi E, Marca GD, Vollono C, Rossini PM. Electromagnetic fields and EEG spiking rate in patients with focal epilepsy. Clin Neurophysiol. 2014 Aug 11. pii: S1388-2457(14)00404-0. doi: 10.1016/j.clinph.2014.07.013. [Epub ahead of print]

OBJECTIVE: Despite the increase in mobile telephone technology use and possible effects on brain excitability, no studies have investigated the impact of GSM like (Global System for Mobile Communications) signal on the ongoing spiking activity in human epileptic patients. METHODS: Brain electrical (electroencephalogram, EEG) activity of 12 patients with focal epilepsy has been recorded under both Real and Sham exposure following a double-blind, crossover, counterbalanced design: before the exposure (pre-exposure/baseline session), during the Real or Sham 45min exposure (during-exposure session), and after the exposure (post-exposure session). As dependent variables both spiking activity (spikes count) and EEG quantitative indices (spectral power and coherence data) have been considered. RESULTS: Spiking activity tended to be lower under Real than under Sham exposure. EEG spectral content analysis indicated a significant increase of Gamma band under Real exposure, mainly evident in Parieto-occipital and Temporal areas. Connectivity data indicated increased interhemispheric (left temporal to right frontal Regions of Interest, ROIs) instantaneous coherence, in the Beta frequency band during-exposure with respect to baseline session. No significant modification of lagged coherence was observed. CONCLUSIONS: Acute GSM exposure in

Studies that show **Cell Phone** Health Effects

epileptic patients slightly influences their EEG properties, without reaching any clinical relevance. SIGNIFICANCE: No signs were found of an increased risk of incoming seizures for these patients as a consequence of using mobile phones.

Curcio G, Ferrara M, Limongi T, Tempesta D, Di Sante G, De Gennaro L, Quaresima V, Ferrari M. Acute mobile phones exposure affects frontal cortex hemodynamics as evidenced by functional near-infrared spectroscopy. *J Cereb Blood Flow Metab.*29(5):903-910, 2009.

This study aimed to evaluate by functional near-infrared spectroscopy (fNIRS), the effects induced by an acute exposure (40 mins) to a GSM (Global System for Mobile Communications) signal emitted by a mobile phone (MP) on the oxygenation of the frontal cortex. Eleven healthy volunteers underwent two sessions (Real and Sham exposure) after a crossover, randomized, double-blind paradigm. The whole procedure lasted 60 mins: 10-mins baseline (Bsl), 40-mins (Exposure), and 10-mins recovery (Post-Exp). Together with frontal hemodynamics, heart rate, objective and subjective vigilance, and self-evaluation of subjective symptoms were also assessed. The fNIRS results showed a slight influence of the GSM signal on frontal cortex, with a linear increase in [HHb] as a function of time in the Real exposure condition ($F(4,40)=2.67$; $P=0.04$). No other measure showed any GSM exposure-dependent changes. These results suggest that fNIRS is a convenient tool for safely and noninvasively investigating the cortical activation in MP exposure experimental settings. Given the short-term effects observed in this study, the results should be confirmed on a larger sample size and using a multichannel instrument that allows the investigation of a wider portion of the frontal cortex.

Curcio G, Valentini E, Moroni F, Ferrara M, De Gennaro L, Bertini M Psychomotor performance is not influenced by brief repeated exposures to mobile phones. *Bioelectromagnetics.*29(3):237-241,2008.

The present study investigated the presence of a cumulative effect of brief and repeated exposures to a GSM mobile phone (902.40 MHz, 217 Hz modulated; peak power of 2 W; average power of 0.25 W; SAR = 0.5 W/kg) on psychomotor functions. To this end, after each of 3 15-min exposures, both an acoustic simple reaction time task (SRTT) and a sequential finger tapping task (SFTT) were administered to 24 subjects. The present study was unable to detect the cumulative effects of brief and repeated EMF exposure on human psychomotor performance, although there was a non-statistical trend to shorter reaction times. In summary, these data show an absence of effects with these particular exposure conditions; however, possible cognitive effects induced by different signal characteristics cannot be excluded.

Bolshakov MA, Alekseev SI, Bursting responses of Lymnea neurons to microwave radiation. *Bioelectromagnetics* 13(2):119-129, 1992.

Microelectrode and voltage-clamp techniques were modified to record spontaneous electrical activity and ionic currents of Lymnea stagnalis neurons during exposure to a 900-MHz field in a waveguide-based apparatus. The field was pulse-modulated at