



American Academy of Pediatrics Webpage Excerpts

Electromagnetic Fields: A Hazard to Your Health?

In recent years, concern has increased about exposure to radio frequency electromagnetic radiation emitted from cell phones and phone station antennae. An Egyptian study confirmed concerns that living nearby mobile phone base stations increased the risk for developing:

- Headaches
- Memory problems
- Dizziness
- Depression
- Sleep problems

Short-term exposure to these fields in experimental studies have not always shown negative effects, but this does not rule out cumulative damage from these fields, so larger studies over longer periods are needed to help understand who is at risk. In large studies, an association has been observed between symptoms and exposure to these fields in the everyday environment.

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Environmental Pollution

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Thermal and non-thermal health effects of low intensity non-ionizing radiation: An international perspective[☆]

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ABSTRACT

Exposure to low frequency and radiofrequency electromagnetic fields at low intensities poses a significant health hazard that has not been adequately addressed by national and international organizations such as the World Health Organization. There is strong evidence that excessive exposure to mobile phone-frequencies over long periods of time increases the risk of brain cancer both in humans and animals. The mechanism(s) responsible include induction of reactive oxygen species, gene expression alteration and DNA damage through both epigenetic and genetic processes. *In vivo* and *in vitro* studies demonstrate adverse effects on male and female reproduction, almost certainly due to generation of reactive oxygen species. There is increasing evidence the exposures can result in neurobehavioral decrements and that some individuals develop a syndrome of "electro-hypersensitivity" or "microwave illness", which is one of several syndromes commonly categorized as "idiopathic environmental intolerance". While the symptoms are non-specific, new biochemical indicators and imaging techniques allow diagnosis that excludes the symptoms as being only psychosomatic. Unfortunately standards set by most national and international bodies are not protective of human health. This is a particular concern in children, given the rapid expansion of use of wireless technologies, the greater susceptibility of the developing nervous system, the hyperconductivity of their brain tissue, the greater penetration of radiofrequency radiation relative to head size and their potential for a longer lifetime exposure.

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The 2022 study **"Measurements of radiofrequency electromagnetic fields, including 5G, in the city of Columbia, South Carolina, USA"** published in World Academy of Sciences Journal authored by Tarmo Koppel and Lennart Hardell MD of the Environment and Cancer Research Foundation found the highest RF exposure readings were registered close to cell phone base station antennas mounted on top of utility poles, street lamps or traffic lights.



Figure 7. Gervais Street: Cell phone base station antenna placed close to street level and causing high exposure to pedestrians and nearby café visitors (exposure scenario illustration). The antenna appears camouflaged and seemingly part of a utility pole. The measurer only discovered the antenna due to the high radiofrequency levels in the vicinity.

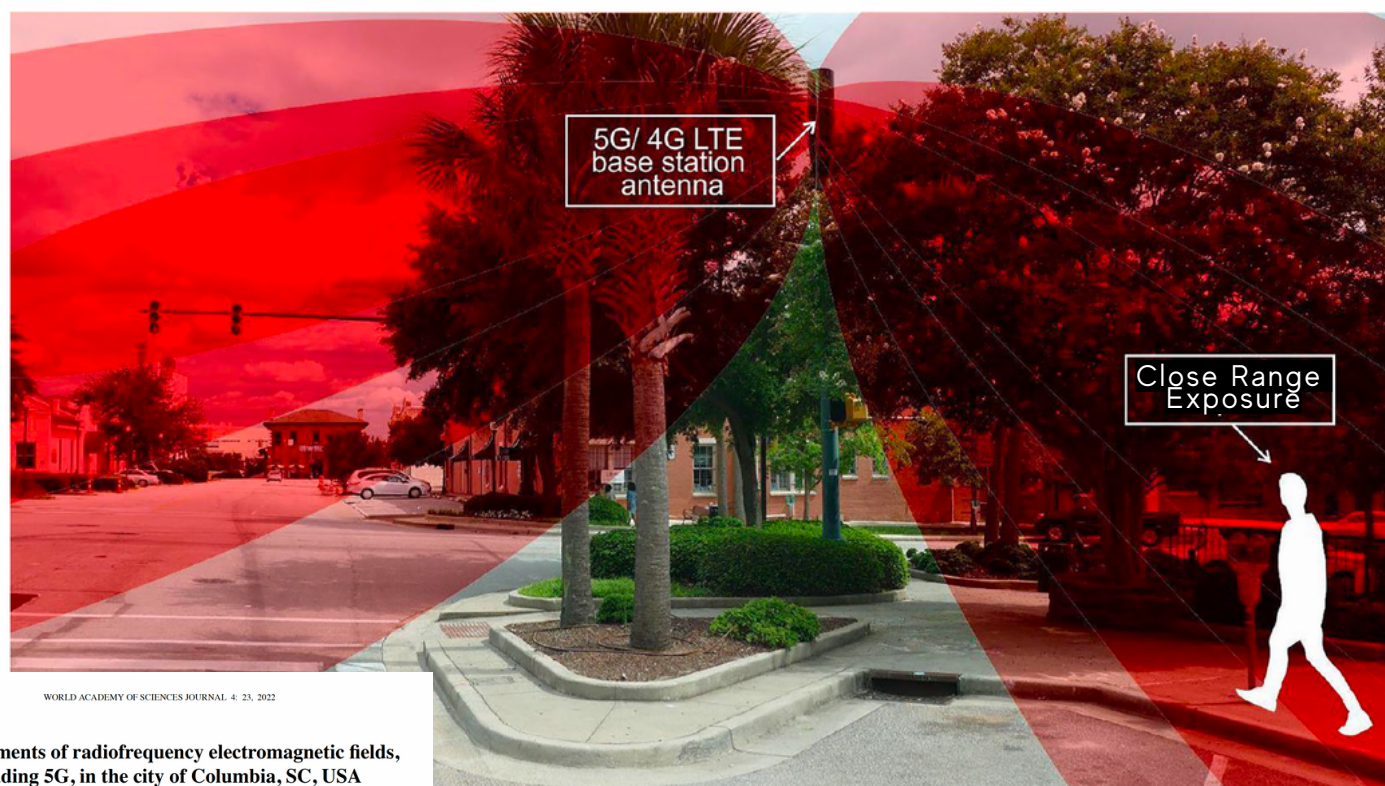


Figure 8. Gervais Street: Another cell phone base station antenna close to street level and causing high exposure to pedestrians (exposure scenario illustration). Note the antenna appears undistinguishable from the utility pole an unnoticeable between the trees.

Health impact of 5G

Current state of knowledge of 5G-related carcinogenic and reproductive/developmental hazards as they emerge from epidemiological studies and in vivo experimental studies

The upcoming deployment of 5G mobile networks will allow for significantly faster mobile broadband speeds and increasingly extensive mobile data usage. Technical innovations include a different transmission system (MIMO: use of multiple-input and multiple-output antennas), directional signal transmission or reception (beamforming), and the use of other frequency ranges. At the same time, a change is expected in the exposure to electromagnetic fields (EMF) of humans and the environment. In addition to those used to date, the 5G pioneer bands identified at EU level have frequencies of 700 MHz, 3.6 GHz (3.4 to 3.8 GHz) and 26 GHz (24.25 to 27.5 GHz). The first two frequencies (FR1) are similar to those used for 2G to 4G technologies and have been investigated in both epidemiological and experimental studies for different end points (including carcinogenicity and reproductive/developmental effects), while 26 GHz (FR2) and higher frequencies have not been adequately studied for the same end points.

The International Agency for Research on Cancer (IARC) classified radiofrequency (RF) EMF as 'possibly carcinogenic to humans' (Group 2B) and recently recommended RF exposure for re-evaluation 'with high priority' (IARC, 2019). Since 2011 a great number of studies have been performed, both epidemiological and experimental. The present review addresses the current knowledge regarding both carcinogenic and reproductive/developmental hazards of RF as exploited by 5G. There are various *in vivo* experimental and epidemiological studies on RF at a lower frequency range (450 to 6000 MHz), which also includes the frequencies used in previous generations' broadband cellular networks, but very few (and inadequate) on the higher frequency range (24 to 100 GHz, centimetre/MMW).

The review shows: 1) 5G lower frequencies (700 and 3 600 MHz): a) limited evidence of carcinogenicity in epidemiological studies; b) sufficient evidence of carcinogenicity in experimental bioassays; c) sufficient evidence of reproductive/developmental adverse effects in humans; d) sufficient evidence of reproductive/developmental adverse effects in experimental animals; 2) 5G higher frequencies (24.25-27.5 GHz): the systematic review found no adequate studies either in humans or in experimental animals.

Conclusions: 1) cancer: FR1 (450 to 6 000 MHz): EMF are probably carcinogenic for humans, in particular related to gliomas and acoustic neuromas; FR2 (24 to 100 GHz): no adequate studies were performed on the higher frequencies; 2) reproductive developmental effects: FR1 (450 to 6 000 MHz): these frequencies clearly affect male fertility and possibly female fertility too. They may have possible adverse effects on the development of embryos, foetuses and newborns; FR2 (24 to 100 GHz): no adequate studies were performed on non-thermal effects of the higher frequencies.



Very high radiofrequency radiation at Skeppsbron in Stockholm, Sweden from mobile phone base station antennas positioned close to pedestrians' heads

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Fig. 3. Street view on the Skeppsbron street with some of the mobile phone base station antennas pointed out with a circle; note the low placement of the antennas, where microwaves irradiate the pedestrian at close range.

ABSTRACT

In urban environment there is a constant increase of public exposure to radiofrequency electromagnetic fields from mobile phone base stations. With the placement of mobile phone base station antennas radiofrequency hotspots emerge. This study investigates an area at Skeppsbron street in Stockholm, Sweden with an aggregation of base station antennas placed at low level close to pedestrians' heads. Detailed spatial distribution measurements were performed with 1) a radiofrequency broadband analyzer and 2) a portable exposimeter. The results display a greatly uneven distribution of the radiofrequency field with hotspots. The highest spatial average across all quadrat cells was 12.1 V m^{-1} (388 mW m^{-2}), whereas the maximum recorded reading from the entire area was 31.6 V m^{-1} (2648 mW m^{-2}). Exposimeter measurements show that the majority of exposure is due to mobile phone downlink bands. Most dominant are 2600 and 2100 MHz bands used by 4G and 3G mobile phone services, respectively. The average radiofrequency radiation values from the earlier studies show that the level of ambient RF radiation exposure in Stockholm is increasing. This study concluded that mobile phone base station antennas at Skeppsbron, Stockholm are examples of poor radiofrequency infrastructure design which brings upon highly elevated exposure levels to popular seaside promenade and a busy traffic street.

Studies from recent decades have shown elevated health risk under long term exposure to such highly elevated radiofrequency fields.

A review by Khurana et al. (2010) found in 80% of the available studies neurobehavioral symptoms or cancer in populations living at distances <500 m from base stations (Khurana et al., 2010). In another review exposure from base stations and other antenna arrays showed changes in immunological and reproductive systems as well as DNA double strand breaks, influence on calcium movement in the heart and increased proliferation rates in human astrocytoma cancer cells (Levitt and Lai, 2010).

When a GSM 900 MHz base station was installed in the village Rimbach in Germany it had an influence on the neurotransmitters adrenaline, noradrenaline, dopamine and phenylethylamine (Buchner and Eger, 2011). Influence on cortisol and thyroid hormones in people living near base stations was shown in other studies (Augner et al., 2010; Eskander et al., 2012).

Dode et al. (2011) compared base station (BS) clusters and cases of deaths by neoplasia in the Belo Horizonte municipality, Minas Gerais state, Brazil, from 1996 to 2006. In their study largest electric field was 12.4 V m^{-1} and the smallest was 0.4 V m^{-1} . They found cancer-related death rates be higher close to base stations. This finding confirmed earlier findings by Eger (Eger et al., 2004).

In a study from India, genetic damage using the single cell gel electrophoresis (comet) assay was assessed in peripheral blood leukocytes of individuals residing in the vicinity of a mobile phone base station and comparing it to that in healthy controls. Genetic damage parameters of DNA migration length, damage frequency, and damage index were significantly ($p < 0.001$) elevated in the sample group compared to respective values in healthy controls (Gandhi et al., 2014).

The effect of RF radiation among 20 subjects living close to mobile phone base station compared with 20 subjects living with a distance of about 1 km was studied (Singh et al., 2016). The authors concluded that: "It was unveiled that a majority of the subjects who were residing near the mobile base station complained of sleep disturbances, headache, dizziness, irritability, concentration difficulties, and hypertension. A majority of the study subjects had significantly lesser stimulated salivary secretion ($p < 0.01$) as compared to the control subjects."

Zothansiam et al. (2017) in India inspected DNA damage and antioxidant status in cultured human peripheral blood lymphocytes (HPBLs) of individuals residing in the vicinity of mobile phone base stations and compared it with healthy controls living further away. Analyses of data from the exposed group ($n = 40$), residing within a perimeter of 80 m of mobile base stations, showed statistically significantly ($p < 0.0001$) higher frequency of micronuclei when compared to the control group, residing 300 m away from the mobile base station.

The Ramazzini Institute findings (Falcioni et al., 2018) are supported by the results in the USNTP study on rats and mice exposed to RF radiation (National Toxicology Program, 2018a, 2018b). A clear evidence of increased incidence of heart Schwannoma and some evidence of glioma and tumours in the adrenal medulla in male rats was found according to the expert panel, for further discussion see Hardell and Carlberg (2019).

The study concluded that Skeppsbron street mobile phone base station antennas are examples of a poor radiofrequency infrastructure design with mobile phone base station antennas positioned into close range to the general public which brings upon high exposure levels. Given the low placement of the antennas (height from the street floor), the highest exposure was often registered at pedestrian head level. Given that head is one of most vulnerable parts of the body, these placements by mobile telephony service providers put pedestrians into unnecessary risk. Position of these antennas, can pose a health risk to people at close range. This is especially critical for people at particular risk, including persons with medical implants, pregnant women or chronically ill persons.

Based on the latest scientific literature regarding RF exposure and adverse health effects, this study recommends repositioning such base station antennas to areas away from the nearby inhabitants, workers and the general public. Alternatively, very low power antennas may also be considered to reduce the exposure. Occupational exposure of people

Biological effects from exposure to electromagnetic radiation emitted by cell tower base stations and other antenna arrays

B. Blake Levitt and Henry Lai

Abstract: The siting of cellular phone base stations and other cellular infrastructure such as roof-mounted antenna arrays, especially in residential neighborhoods, is a contentious subject in land-use regulation. Local resistance from nearby residents and landowners is often based on fears of adverse health effects despite reassurances from telecommunications service providers that international exposure standards will be followed. Both anecdotal reports and some epidemiology studies have found headaches, skin rashes, sleep disturbances, depression, decreased libido, increased rates of suicide, concentration problems, dizziness, memory changes, increased risk of cancer, tremors, and other neurophysiological effects in populations near base stations. The objective of this paper is to review the existing studies of people living or working near cellular infrastructure and other pertinent studies that could apply to long-term, low-level radiofrequency radiation (RFR) exposures. While specific epidemiological research in this area is sparse and contradictory, and such exposures are difficult to quantify given the increasing background levels of RFR from myriad personal consumer products, some research does exist to warrant caution in infrastructure siting. Further epidemiology research that takes total ambient RFR exposures into consideration is warranted. Symptoms reported today may be classic microwave sickness, first described in 1978. Non-ionizing electromagnetic fields are among the fastest growing forms of environmental pollution. Some extrapolations can be made from research other than epidemiology regarding biological effects from exposures at levels far below current exposure guidelines.



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Case Report

How does long term exposure to base stations and mobile phones affect human hormone profiles?

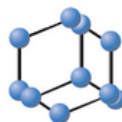
Emad F. Eskander , Selim F. Estefan, Ahmed A. Abd-Rabou

Objectives

This study is concerned with assessing the role of exposure to radio frequency radiation (RFR) emitted either from mobiles or base stations and its relations v human's hormone profiles.

Results

This study showed significant decrease in volunteers' ACTH, cortisol, thyroid hormones, prolactin for young females, and testosterone levels.

BENTHAM
SCIENCE

Low Intensity Electromagnetic Fields Act *via* Voltage-Gated Calcium Channel (VGCC) Activation to Cause Very Early Onset Alzheimer's Disease: 18 Distinct Types of Evidence

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Abstract: Electronically generated electromagnetic fields (EMFs), including those used in wireless communication such as cell phones, Wi-Fi and smart meters, are coherent, producing very high electric and magnetic forces, which act on the voltage sensor of voltage-gated calcium channels to produce increases in intracellular calcium $[Ca^{2+}]_i$. The calcium hypothesis of Alzheimer's disease (AD) has shown that each of the important AD-specific and nonspecific causal elements is produced by excessive $[Ca^{2+}]_i$. $[Ca^{2+}]_i$ acts in AD *via* excessive calcium signaling and the peroxynitrite/oxidative stress/inflammation pathway, which are each elevated by EMFs. An apparent vicious cycle in AD involves amyloid-beta protein ($A\beta$) and $[Ca^{2+}]_i$. Three types of epidemiology suggest EMF causation of AD, including early onset AD. Extensive animal model studies show that low intensity EMFs cause neurodegeneration, including AD, with AD animals having elevated levels of $A\beta$, amyloid precursor protein and BACE1. Rats exposed to pulsed EMFs every day are reported to develop universal or near universal very early onset neurodegeneration, including AD; these findings are superficially similar to humans with digital dementia. EMFs producing modest increases in $[Ca^{2+}]_i$ can also produce protective, therapeutic effects. The therapeutic pathway and peroxynitrite pathway inhibit each other. A summary of 18 different findings is provided, which collectively provide powerful evidence for EMF causation of AD. The author is concerned that smarter, more highly pulsed "smart" wireless communication may cause widespread very, very early onset AD in human populations.

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The roles of intensity, exposure duration, and modulation on the biological effects of radiofrequency radiation and exposure guidelines

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ABSTRACT

In this paper, we review the literature on three important exposure metrics that are inadequately represented in most major radiofrequency radiation (RFR) exposure guidelines today: intensity, exposure duration, and signal modulation. Exposure intensity produces unpredictable effects as demonstrated by nonlinear effects. This is most likely caused by the biological system's ability to adjust and compensate but could lead to eventual biomic breakdown after prolonged exposure. A review of 112 low-intensity studies reveals that biological effects of RFR could occur at a median specific absorption rate of 0.0165 W/kg. Intensity and exposure duration interact since the dose of energy absorbed is the product of intensity and time. The result is that RFR behaves like a biological "stressor" capable of affecting numerous living systems. In addition to intensity and duration, man-made RFR is generally modulated to allow information to be encrypted. The effects of modulation on biological functions are not well understood. Four types of modulation outcomes are discussed. In addition, it is invalid to make direct comparisons between thermal energy and radiofrequency electromagnetic energy. Research data indicate that electromagnetic energy is more biologically potent in causing effects than thermal changes. The two likely function through different mechanisms. As such, any current RFR exposure guidelines based on acute continuous-wave exposure are inadequate for health protection.

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Radiofrequency radiation (RFR); intensity; duration of exposure; modulation; specific absorption rate (SAR); biological effects