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April 27, 2020

Re: Proceedings 19-226 – Targeted Changes to the Commissions' Rules Regarding Human Exposure to Radiofrequency Electromagnetic Fields

Dear Federal Communications Commission,

I am submitting my formal comments regarding proceedings 19-226.

In late December 2019, shortly after our local electric company rolled out their Smart Meters and T-Mobile launched 5G in our area, I began having extreme trouble breathing. This resulted in two emergency room visits in January 2020.

I have never had ANY trouble breathing before this. Since then, I have seen a cardiologist and a pulmonologist. All of their tests came back perfect and I appear to be in perfect health. I ran up about $16,000 in medical bills from all of this.

I continue to have trouble breathing intermittently. It feels like I suddenly can't get enough oxygen, yet I do not have asthma. If I drive by too many cell phone towers, it triggers this breathing problem, especially if I have to stop at a traffic light next to a 5G small cell tower. My husband has witnessed this effect on me on multiple occasions. I also now have sporadic insomnia and have difficulty sleeping through the night.

The above symptoms persist, and with no medical explanation. Thus, they appear to be caused by environmental exposure to these technologies, such as the cell phone towers and smart meters in the neighborhood near our home.

To limit my family's exposure to these technologies, we have turned off our Wi-Fi and Bluetooth in our home and have hardwired EVERYTHING - TV, router, modem, and all computer connections and phones. We also opted out of having a smart meter installed, even though it costs us extra money every month to have this safety.

I have several friends that now have electromagnetic sensitivity, too, and it is having a negative effect on their lives and health as well.

Using "thermal" effect studies as the sole method to prove safety is criminal, when there are now thousands of published, peer-reviewed studies from around the world proving biological harm to all life from these cellular technologies.

As just one example of many, please see Reference (1) included below, from Martin L. Pall, PhD, Professor Emeritus of Biochemistry and Basic Medical Sciences, Washington State University.

The FCC needs to put a freeze on all cell technology rollouts (including satellites) until they are fully proven to be biologically safe for all life forms.

Also, The FCC should request the FDA to establish biologically-based population-protective limits for all electronic product radiation, as they are statutorily required to do (http://www.electricalpollution.com/documents/PressReleaseFDANegligence12Feb2020.pdf).

It would be indefensible at this time for the FCC to take any actions that may increase exposure of the population to Radiofrequency Electromagnetic Fields from cell phones, base stations, Wi-Fi, Smart Meters and other radio frequency or extremely low frequency emitting devices. The current levels of exposure **are not biologically safe** and must be reduced rather than increased further.

Sincerely,

LaFonda Gorham

Reference (1): Martin L. Pall, PhD, Professor Emeritus of Biochemistry and Basic Medical Sciences, Washington State University

Rev Environ Health. 2015;30(2):99-116. doi: 10.1515/reveh-2015-0001.

Scientific evidence contradicts findings and assumptions of Canadian Safety Panel 6: microwaves act through voltage-gated calcium channel activation to induce biological impacts at non-thermal levels, supporting a paradigm shift for microwave/lower frequency electromagnetic field action.

Pall ML.

Abstract

This review considers a paradigm shift on microwave electromagnetic field (EMF) action from only thermal effects to action via voltage-gated calcium channel (VGCC) activation. Microwave/lower frequency EMFs were shown in two dozen studies to act via VGCC activation because all effects studied were blocked by calcium channel blockers. This mode of action was further supported by hundreds of studies showing microwave changes in calcium fluxes and intracellular calcium [Ca2+]i signaling. The biophysical properties of VGCCs/similar channels make them particularly sensitive to low intensity, non-thermal EMF exposures. Non-thermal studies have shown that in most cases

pulsed fields are more active than are non-pulsed fields and that exposures within certain intensity windows have much large biological effects than do either lower or higher intensity exposures; these are both consistent with a VGCC role but inconsistent with only a heating/thermal role. Downstream effects of VGCC activation include calcium signaling, elevated nitric oxide (NO), NO signaling, peroxynitrite, free radical formation, and oxidative stress. Downstream effects explain repeatedly reported biological responses to non-thermal exposures: oxidative stress; single and double strand breaks in cellular DNA; cancer; male and female infertility; lowered melatonin/sleep disruption; cardiac changes including tachycardia, arrhythmia, and sudden cardiac death; diverse neuropsychiatric effects including depression; and therapeutic effects. Non-VGCC non-thermal mechanisms may occur, but none have been shown to have effects in mammals. Biologically relevant safety standards can be developed through studies of cell lines/cell cultures with high levels of different VGCCs, measuring their responses to different EMF exposures. The 2014 Canadian Report by a panel of experts only recognizes thermal effects regarding safety standards for non-ionizing radiation exposures. Its position is therefore contradicted by each of the observations above. The Report is assessed here in several ways including through Karl Popper's assessment of strength of evidence. Popper argues that the strongest type of evidence is evidence that falsifies a theory; second strongest is a test of "risky prediction"; the weakest confirms a prediction that the theory could be correct but in no way rules out alternative theories. All of the evidence supporting the Report's conclusion that only thermal effects need be considered are of the weakest type, confirming prediction but not ruling out alternatives. In contrast, there are thousands of studies apparently falsifying their position. The Report argues that there are no biophysically viable mechanisms for non-thermal effects (shown to be false, see above). It claims that there are many "inconsistencies" in the literature causing them to throw out large numbers of studies; however, the one area where it apparently documents this claim, that of genotoxicity, shows no inconsistencies; rather it shows that various cell types, fields and end points produce different responses, as should be expected. The Report claims that cataract formation is produced by thermal effects but ignores studies falsifying this claim and also studies showing [Ca2+]i and VGCC roles. It is time for a paradigm shift away from only thermal effects toward VGCC activation and consequent downstream effects.

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