

Appendix:

Scientific evidence re: RFR (Radio Frequency Radiation – in this case microwave radiation in air) toxicity concerning carcinogenic, mutagenic and human reproductive effects.

We use the acronym RFR to describe man-made electromagnetic radiation used in 4G and 5G wireless telephony, public Wi-Fi, and proposed 'smart city' functionality systems. EMFs (electromagnetic fields) and RF-EMFs (radio frequency electromagnetic fields) terminology used in the research cited below, are parallel terminology.

1. 'A Review of the Health Risks of Radiofrequency Radiation Employed in 5G Technology and the Implications for UK Policymaking', 2020 Prof Tom Butler:

<https://www.radiationresearch.org/wp-content/uploads/2020/05/Prof-Tom-Butler-Submission-on-5G-RFR-Final-27-05-2020.pdf>

The review should be read in its entirety, as background argument and evidence. Section 2 'What are the health risks of Non-Ionising Radiation', reports on Kostoff et. al. 2020, that peer-reviewed studies reveal 'potential adverse health effects from 4G and 5G technology', including: 'carcinogenicity, mutagenic, and teratogenicity (a teratogen is an agent that can disturb the development of the embryo or fetus, halting the pregnancy or producing a congenital malformation (i.e. a birth defect)), reproductive problems, and pregnancy outcomes'

2. 'EUROPAEM EMF Guideline 2016 for the prevention, diagnosis and treatment of EMF-related health problems and illnesses', 2016,

Belyaev I, Dean A, Eger H, Hubmann G, Jandrisovits R, Johansson O, Kern M, Kundi M, Lercher P, Mosgöller W, Moshhammer H, Müller K, Oberfeld G, Ohnsorge P, Pelzmann P, Scheingraber C, Thill R. here (go to the 'full text link' in the right hand corner of the abstract) The guideline presents a clinical framework for understanding the causes of injury risk/harm caused by RFR, and how to diagnose, treat, and possible ways of mitigating illness/injury. The guideline reports on: the health consequences of electro-magnetic hypersensitivity (pages 9 to 22); treatment strategies for EMF-related illnesses including EHS (page 13); the measurement of EMF exposure (page 17); and, on reduction/preventative strategies (page 20). The guideline describes the carcinogenic effects of RFR pollution (page 5); the genotoxic effects, particularly DNA damage and the impairment of DNA repair mechanisms (page 6); neurological effects (page 7); and the effects of the pollutants on infertility and reproduction (page 9)

<https://pubmed.ncbi.nlm.nih.gov/27454111/>

Paragraph 11 reports that, 'Non-thermal EMF exposure can epigenetically (i.e. modification of gene expression causing changes that affect how genes function) interfere with the differentiation and proliferation programs of stem cells in fetal and adult tissues through ROS

production (citing four studies). Stem cells are the most sensitive cells to EMF exposure (citing two studies) and this is particularly the case for neural stem cells of the hippocampus (citing a single study)', and, Paragraph 12, reports on the vulnerability of human cell structures and their activating 'ionic currents and electrical fields' by man-made RFR; the probable cellular effects of such interference; and, the developmental injury risks posed by such interference, 'the endogenous natural ionic currents and electrical fields in the human body (citing a single study) are vulnerable to the oscillary properties of non-thermal EMFs. These consequently may cause detrimental effect on cell differentiation and proliferation in adult tissues (citing a single study) in addition to the effects on cell differentiation, proliferation and migration in the fetus (citing three studies). Fetal programming cannot be reduced to only genetic programs. Developmental processes are essentially epigenetic (citing a single study), and exposure to epigenetic stressors such as non-thermal EMFs are much more dangerous for the fetus than for the adults'. Part 6.5 'Calcium Regulation' reports that the activation of calcium regulation of cell functions is altered on exposure to RFR, and that effect may be a biological trigger for activating molecular pathways to cancer. In 6.2, paragraph 1, 'dose specific absorption' or 'power density complemented by duration of exposure' as a surrogate for RFR non-thermal effects, are suggested as more relevant surrogates than reliance on thermal effect Specific Absorption Rates (SARs), alone.

3. 'Thermal and non-thermal health effects of low intensity non-ionizing radiation: An international perspective', 2018,

<https://ecfsapi.fcc.gov/file/12103008105187/nonionizing%20radiation%20international%20perspective%20Belpomme%20Hardell%20Carpenter%202018.pdf#https://ecfsapi.fcc.gov/file/12103008105187/nonionizing%20radiation%20international%20perspective%20Belpomme%20Hardell%20Carpenter%202018.pdf>

Belpomme D, Hardell L, Belyaev I, Burgio E, Carpenter D. here This summary of research demonstrates that, 1. human exposure to RFR (EMF) has increased dramatically, 2. low and non-thermal RFR exposure intensifies carcinogenic risks, 3. electro-hypersensitivity places some people at increased risk 4. there is an urgent need to recognise hazards associated with excessive exposure to non-thermal effects of electromagnetic fields. The research is intended to provide a, 'a holistic picture of the processes explaining most of all the adverse effects of EMF exposures. It summarises the evidence for cancer resulting from exposure to EMF's, and identifies other diseases or pathological conditions such as Alzheimer's Disease and hypofertility that have been shown to be associated with excessive exposure to low-intensity EMF's, and to outline (Introduction, final paragraph), 'what is known about the mechanisms whereby non-thermal EMF radiation can cause disease with special reference to EMF-related free radical production and epigenetic and genetic mechanisms'. Section 2 on 'Mobile phone use and the risk for glioma, meningioma and acoustic neuroma' identifies carcinogenic risks of RFR related to Mobile Phone use in the Introduction, with the following Parts on specific clinical conditions: 2.1 Glioma; 2.2 Meningioma; 2.3 Acoustic Neuroma; and with Part 2.4 being a Summary. Section 3 'Other diseases and pathological conditions attributed to exposure to low-intensity EMF's' presents evidence in paragraph 2 on the human reproductive suppressing effects of RFR's associated with spontaneous abortions, male hypofertility and sperm

abnormalities. Section 6 'Mechanisms whereby low intensity electromagnetic fields cause biological effects and harm' reports on the detrimental genotoxic effects of RFR (EMFs, ELF and RF, and free radicals); with Part 6.3 'Oxidative stress' in paragraph 4, referencing the findings of Lai and Belyaev. Part 6.4 on 'Genetic and epigenetic mechanisms' reports the conclusion that, 'genetic effects are the most direct cause for carcinogenicity', in paragraph 1, and the conclusion is followed with the argument that this conclusion applies for both, 'genotoxic changes caused by exposure to EMFs and existing polymorphic genetic differences within a population (that is increasingly) susceptible to cancer', and that as a consequence, 'DNA can no longer be considered to be unaffected by environmental EMF levels, as many studies have shown that DNA can be activated and damaged by EMFs at levels that have been considered to be safe', referring to Blank and Goodman, 1999. Paragraph 2 and 3 reports on ELF-ENF induced DNA damage (breakage); paragraph 3 reports on childhood leukaemia, and the 'polymorphic' effects on DNA repair gene; paragraph 4 reports on processes that lead to RF-EMF induced DNA damage, changes in DNA structure, and chromosome instability; paragraph 7 argues that the effects of RFR on 'stress response genes' presents an, 'unambiguous demonstration that EMF exposure even at non-tissue heating intensities has the potential to be harmful to cells and organisms'.¹⁶

Paragraph 11 reports that, 'Non-thermal EMF exposure can epigenetically (i.e. modification of gene expression causing changes that affect how genes function) interfere with the differentiation and proliferation programs of stem cells in fetal and adult tissues through ROS production (citing four studies). Stem cells are the most sensitive cells to EMF exposure (citing two studies) and this is particularly the case for neural stem cells of the hippocampus (citing a single study)', and, Paragraph 12, reports on the vulnerability of human cell structures and their activating 'ionic currents and electrical fields' by man-made RFR; the probable cellular effects of such interference; and, the developmental injury risks posed by such interference, 'the endogenous natural ionic currents and electrical fields in the human body (citing a single study) are vulnerable to the oscillary properties of non-thermal EMFs. These consequently may cause detrimental effect on cell differentiation and proliferation in adult tissues (citing a single study) in addition to the effects on cell differentiation, proliferation and migration in the fetus (citing three studies). Fetal programming cannot be reduced to only genetic programs. Developmental processes are essentially epigenetic (citing a single study), and exposure to epigenetic stressors such as non-thermal EMFs are much more dangerous for the fetus than for the adults'. Part 6.5 'Calcium Regulation' reports that the activation of calcium regulation of cell functions is altered on exposure to RFR, and that effect may be a biological trigger for activating molecular pathways to cancer. In 6.2, paragraph 1, 'dose specific absorption' or 'power density complemented by duration of exposure' as a surrogate for RFR non-thermal effects, are suggested as more relevant surrogates than reliance on thermal effect Specific Absorption Rates (SARs), alone

4. 'Effects of 5G wireless communication on human health', 2020, European Parliament Research Paper

The report explains (paragraph 2) that 5G rollout is being pursued across Europe with, 'the aim to cover all urban areas, railways and major roads with uninterrupted fifth generation wireless communication can only be achieved by creating a very dense network of antennas and transmitters. In other words, the number of higher frequency base stations and other devices will increase significantly'. As 'Background' (paragraph 3, page 2), the report explains that a key strategy is being pursued across the EU, culminating in the European Electronic Communications Code 2018 being brought into UK and all Nation State laws, to enable the 'take-up of 5G services'. The Code is intended to be transposed into law by 21st December 2020, which will have significant impact on how the public are protected from the harmful effects of RFR. The public protection dilemma is revealed in the Section 'Regulation of electromagnetic fields and 5G exposure' where in paragraph 8 (page 4), it is reported that the, 17 'the Scientific Committee on Health, Environmental and Emerging Risks (SCHEER) ... indicated a preliminary estimate of the importance of 5G as high, in a statement in December 2018. Furthermore, it evaluates the scale, urgency and interactions (with ecosystems and species) of possible hazard as high. It suggested that there could be biological consequences from a 5G environment, due to the fact that there is a lack of 'evidence to inform the development of exposure guidelines to 5G technology'. The unresolved high hazard warning of SCHEER, is justified against the argument that RFR is safe in the Section 'Research on EMF and 5G effects on human health' (paragraph 6, pages 6 and 7), which reports on the additional injury risk associated with 'pulsed' RFR emissions from 5G activated masts, antennae and devices, 'Non-ionising radiation, which includes radiation from mobile phones and 5G, is perceived as harmless in general, due to its lack of potency. However, some of the above-mentioned scientists point out that, in the particular case of 5G, the issue is not the potency, but the pulse, the frequency to which the whole population will be exposed due to the dense network of antennas and the estimated billions of simultaneous connections. As 5G employs a very high level of pulsations, the idea behind 5G is to use higher frequencies, which allows such high levels of pulsation, in order to carry very large amounts of information per second. Studies show that pulsed EMF are in most cases more biologically active and therefore more dangerous than non-pulsed EMF. Every single wireless communication device communicates at least partially via pulsations, and the smarter the device, the more pulsations. Consequently, even though 5G can be weak in terms of power, its constant abnormal pulse radiation can have an effect. Along with the mode and duration of exposures, characteristics of the 5G signal such as pulsing seem to increase the biological and health impacts of exposure, including DNA damage, which is considered to be a cause of cancer. DNA damage is also linked to reproductive decline and neurodegenerative diseases'. The Section on 'Stakeholder's views' (paragraph 2, page 8) reports on the European Commission and Telecoms Companies commitment to support, 'research and innovation to develop 5G networks that comply with international standards (including presumably, ISO standards) and regulations and develops systems designed to operate below the safe health limits of electromagnetic emissions (based on recommendations made in 1999), without reference to the 'biological impacts of 5G radiation'. The 'lacuna' concerning the non-thermal biological effects of RFR, threatens further

injury risks and polluting effects. Those threats are reinforced by an absence of any reported outcome to the Generalised EMF Research using Novel Methods (GERoNiMO) project, and the failure of the European Commission to conduct studies on the 'potential health risks of the 5G technology', as confirmed in the Section 'The road ahead for 5G' (paragraphs 5 and 6, page 9). Consequently, 2020 5G technology is being brought into use with reliance on non-binding public health recommendations made two decades ago (in accordance with guidance promoted through the non-binding European Council Recommendation 1999/519/EC)

5. 'A 2018 Horizon Scan of Emerging Issues for Global Conservation and Biological Diversity: Trends in Ecology & Evolution', pages 54/55, CellPress reviews, January 2018, Vol.33, No.1, Sutherland W, Butchart S, Connor B, Culshaw C, Dicks L, Dinsdale J, Doran H, Entwistle A, Fleishman H, Gibbons D, Jiang Z, Keim B, Le Roux X, Lickorish F, Markillie P, Monk K, Mortimer D, Pearce-Higgins J, Peck L, Pretty J, Seymour C, Spalding M, Tonneijck F, Gleave R.

<https://core.ac.uk/download/pdf/151209216.pdf#https://core.ac.uk/download/pdf/151209216.pdf>

The full text of the emerging issue of the 'Potential Effects on Wildlife of Increases in Electromagnetic Radiation', is reproduced below (pages 54/55). RFR was selected as an emerging issue by 'twenty four experts in conservation research and practice, ecology, economics, policy, and science communication identified 15 topics following a wide consultation. They followed a Delphi like process to score and identify the most important. The issues highlighted span a wide range of fields and include thiamine deficiency in wild animals, the geo-graphic expansion of chronic wasting disease, genetic control of invasive mammal populations and the effect of culturomics on conservation science, policy and action'. The selected issues, 'may have the greatest positive or negative effects but are not yet well recognised by the global conservation community. Themes among these topics include new mechanisms driving the emergence and geographic expansion of diseases, innovative biotechnologies, reassessments of global change, and the development of strategic infrastructure to facilitate global economic priorities'. The text of the RFR theme, reads, 'Potential Effects on Wildlife of Increases in Electromagnetic Radiation. Understanding the potential effects of non ionising radiation on wildlife could become more relevant with the expected adoption of new mobile network technology (5G), which could connect 100 billion devices by 2025. During use, mobile telephones and other smart devices generate radio frequency electro-magnetic fields (RF EMFs), a form of non ionising radiation, which may change biological processes such as neurotransmitter functions, cellular metabolism, and gene and protein expression in certain types of cells, even at low intensities [82]. The notion of risk to human health remains controversial, but there is limited evidence of increased tumour risk in animals [83]. 5G uses the largely untapped band width of the millimetre wavelength, between 30 and 300GHz on the radio spectrum, which uses smaller base stations than current wireless technology. As a result, wireless antennae may be placed densely throughout neighbourhoods on infrastructure such as lamp posts, utility poles, and buildings. This could expose wildlife to more near-field radiation. Although some studies reported negative associations between electro magnetic field strength (radio frequencies and microwaves: 1MHz–3GHz range) and 20 species, for example the density and abundance of house sparrows (*Passer domesticus*) [84,85], these studies have not yielded clear empirical evidence that the observed effects are due to RF-EMFs. The potential effects of RF-EMFs on most taxonomic groups, including migratory birds, bats, and bees, are largely unknown. The evidence to inform the development of exposure

guidelines for 5G technology is limited, raising the possibility of unintended biological consequences [86]. Identifying issues that are truly on the horizon of current scientific thinking entails trade offs. If there is little evidence that a phenomenon is emerging, it is difficult to gauge whether it is likely to become a major threat or opportunity. If there is considerable evidence, an issue no longer is novel. RF-EMFs are an example of the former. Discussions about the potential effects of RF-EMFs are unresolved and controversial [83]. However, the likely considerable global expansion in the use of RF-EMFs, and recognition that new technologies may allow radiation to use higher frequencies of the electromagnetic spectrum than previously were feasible, led us to include this issue among our 15'. References cited are:

82. Sivani, S. and Sudarsanam, D. (2012) Impacts of radiofrequency electro magnetic field (RF-EMF) from cellphone towers and wireless devices on biosystem and ecosystem - a review. *Biol. Med.* 4, 202–216

83. Hardell, L. (2017) World Health Organization, radiofrequency radiation and health – a hard nut to crack. *Int. J. Oncol.* 51, 405–413

84. Balmori, A. and Hallberg, Ö. (2007) The urban decline of the house sparrow (*Passer domesticus*): a possible link with electro-magnetic radiation. *Electromagn. Biol. Med.* 26, 141–151

85. Everaert, J. and Bauwens, D. (2007) A possible effect of electro-magnetic radiation from mobile phone base stations on the number of breeding house sparrows (*Passer domesticus*). *Electromagn. Biol. Med.* 26, 63–72

86. Manville (2016) A briefing memorandum: what we know, can infer, and don't yet know about impacts from thermal and non-thermal non-ionizing radiation to birds and other wildlife – for public release. <http://www.mainecoalitiontostopsmartmeters.org/wp-content/uploads/2016/07/Manville-7-14-2016-Radiation-Briefing-Memo-Public.pdf>

6. Court case involving Prof Lerchl who was found to have wrongly amended a survey about the genotoxicity of microwave EMF effects:

<https://www.emfsa.co.za/news/5g-scientist-prof-alexander-lerchl-guilty-of-false-emf-study-allegations>

“Professor Alexander Lerchl, who is leading a study examining the effects of 5G on human cells (funded by the German Federal Office for Radiation Protection), has been found guilty by the Hanseatic Higher Regional Court of Bremen of disseminating false allegations about the results of the 2004 REFLEX EMF study. Professor Lerchl has to bear the costs of the legal proceedings”

7. Dr Martin Pall – Professor Emeritus Washington State University survey of scientific papers on the subject:

Peer-reviewed scientific studies on EMF related subjects

Science index » [Overview](#) | [Article library](#) | List of studies | [Basic guide to EMFs](#) | [International guidance levels](#) | [Unit conversion](#) | [Frequently asked questions](#) | [Other resources](#)

When it comes to EMF issues, one of the most frequently heard phrases is "There is no evidence to support EMFs having health effects" or simply "There is no conclusive evidence".

This is completely wrong; there is an enormous body of evidence out there, but public and even academic awareness seems to be very poor. Therefore, we will be presenting a list of papers and odds ratios which either show serious effects or are considered important papers on the subject which we have collected over the years. This page will be updated regularly.

P This study has found effects from the exposure or radiation category

N This study has found no effects from the exposure or radiation category

- This study has offered important insights or findings but is neither a positive or null finding

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Mobile and Cordless Phones

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- **Wang P et al**, (July 2018) *Wireless Phone Use and Risk of Adult Glioma: Evidence from a Meta-Analysis*, World Neurosurg. 2018 Jul;115:e629-e636. doi: 10.1016/j.wneu.2018.04.122. Epub 2018 Apr 28. [\[View Author's abstract conclusions\]](#) [\[View on Pubmed\]](#)

P **Hardell L et al**, (May 2018) *Radiofrequency radiation from nearby base stations gives high levels in an apartment in Stockholm, Sweden: A case report.*, Oncol Lett. 2018 May;15(5):7871-7883. doi:

10.3892/ol.2018.8285. Epub 2018 Mar 16. [[View Author's abstract conclusions](#)] [[View on Pubmed](#)]

- **Sagar S et al**, (May 2018) *Comparison of radiofrequency electromagnetic field exposure levels in different everyday microenvironments in an international context*, Environ Int. 2018 May;114:297-306. doi: 10.1016/j.envint.2018.02.036. Epub 2018 Mar 9. [[View Author's abstract conclusions](#)] [[View on Pubmed](#)]

P Okatan DO et al, (February 2018) *Continuous 900-megahertz electromagnetic field applied in middle and late-adolescence causes qualitative and quantitative changes in the ovarian morphology, tissue and blood biochemistry of the rat.*, Int J Radiat Biol. 2018 Feb;94(2):186-198. doi: 10.1080/09553002.2018.1420924. Epub 2018 Jan 9 [[View Author's abstract conclusions](#)] [[View on Pubmed](#)]

- **Bandara P**, (October 2016) *Mobile phone use and the brain cancer incidence rate in Australia.*, Cancer Epidemiol. 2016 Oct;44:110-111. doi: 10.1016/j.canep.2016.08.006. Epub 2016 Aug 20. [[View Author's abstract conclusions](#)] [[View on Pubmed](#)]

N Chapman S et al, (June 2016) *Has the incidence of brain cancer risen in Australia since the introduction of mobile phones 29 years ago?*, Cancer Epidemiol. 2016 Jun;42:199-205. doi: 10.1016/j.canep.2016.04.010. Epub 2016 May 5 [[View Author's abstract conclusions](#)] [[View on Pubmed](#)]

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- **Osei S et al**, (May 2015) *Assessment of levels of occupational exposure to workers in radiofrequency fields of two television stations in Accra, Ghana*, *Radiat Prot Dosimetry.* 2015 May 15. pii: ncv326. [Epub ahead of print] [[View Author's abstract conclusions](#)] [[View on Pubmed](#)]

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N **Masuda H et al**, (May 2015) *No Dynamic Changes in Blood-brain Barrier Permeability Occur in Developing Rats During Local Cortex Exposure to Microwaves, In Vivo.* 2015 05-06;29(3):351-357 [[View Author's abstract conclusions](#)] [[View on Pubmed](#)]

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- **Gryz K et al**, (March 2015) *The Role of the Location of Personal Exposimeters on the Human Body in Their Use for Assessing Exposure to the Electromagnetic Field in the Radiofrequency Range 98-2450 MHz and Compliance Analysis: Evaluation by Virtual Measurements*, Biomed Res Int. 2015;2015:272460. doi: 10.1155/2015/272460. Epub 2015 Mar 24 [[View Author's abstract conclusions](#)] [[View on Pubmed](#)]

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