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Expressions of Concern from Scientists, Physicians, Health Policy Experts & Others

William Rea, MD

**Founder & Director of the Environmental Health Center, Dallas
Past President, American Academy of Environmental Medicine**

“Sensitivity to electromagnetic radiation is the emerging health problem of the 21st century. It is imperative health practitioners, governments, schools and parents learn more about it. The human health stakes are significant”.

Martin Blank, PhD

**Associate Professor, Department of Physiology and Cellular Biophysics,
Columbia University, College of Physicians and Surgeons; Researcher in Bioelectromagnetics;
Author of the [BioInitiative Report's section on Stress Proteins](#).**

“Cells in the body react to EMFs as potentially harmful, just like to other environmental toxins, including heavy metals and toxic chemicals. The DNA in living cells recognizes electromagnetic fields at very low levels of exposure; and produces a biochemical stress response. The scientific evidence tells us that our safety standards are inadequate, and that we must protect ourselves from exposure to EMF due to power lines, cell phones and the like, or risk the known consequences. The science is very strong and we should sit up and pay attention.”

Olle Johansson, Ph.D.

**Associate Professor, The Experimental Dermatology Unit, Department of Neuroscience,
Karolinska Institute, Stockholm, Sweden; Author of the [BioInitiative Report's section on the Immune System](#).**

“It is evident that various biological alterations, including immune system modulation, are present in electrohypersensitive persons. There must be an end to the pervasive nonchalance, indifference and lack of heartfelt respect for the plight of these persons. It is clear something serious has happened and is happening. Every aspect of electrohypersensitive peoples' lives, including the ability to work productively in society, have healthy relations and find safe, permanent housing, is at stake. The basics of life are becoming increasingly inaccessible to a growing percentage of the world's population. I strongly advise all governments to take the issue of electromagnetic health hazards seriously and to take action while there is still time. There is too great a risk that the ever increasing RF-based communications technologies represent a real danger to humans, especially because of their exponential, ongoing and unchecked growth. Governments should act decisively to protect public health by changing the exposure standards to be biologically-based, communicating the results of the independent

Dr. John Goldsmith:

On scientific evidence and radiofrequency radiation

The issue is not what can be inferred from incontrovertible evidence, but what courses of protective action are justified by the evidence that we have.

We have some epidemiological evidence of associations of radiofrequency exposure increases with leukemia, with increased spontaneous abortion, with shifts in red and white blood counts, and with white blood cell mutations. In a recent survey of Swedish and Norwegian analog and digital users, an association of headache, fatigue and sensations of warmth and skin burning increased in frequency with the increased numbers of minutes of use of the equipment.

The classical public health decision system, copied from occupational health standard setting, is an attempt to establish by evidence a threshold level or standard below which no serious or long-term health effect is expected among workers exposed during working hours. When longer term or essentially continuous exposure is involved, this doesn't help much and when we consider the various sensitive groups in the community, we can quickly see that we would need more restrictive standards to protect them.

In short our present system is a body-counting, engineering based approach, which fails to anticipate any effects with a latency period during which no effects may be apparent. This includes most cancers and many respiratory problems. A system of "prudent avoidance" promulgated among others by a group of Swedish environmental agencies offers an alternative approach. It will be some time before we shall have enough experience to determine its overall value

The meaning of the term "proven safe"

The first issue is the perennial battle over whether a drug or industrial agent or process has to be proven "safe" by those who want to produce or sell it, or has to be proven unsafe by some agency which is responsible for regulation.

In the case of drugs in the U.S. the dominant attitude is the former. In the case of agents producing environmental health risks, the battle has yet to be engaged, but the need is clear.

A second part of the problem is defining what is the operational meaning of "safe," and who we agree is qualified or delegated to make that decision. I think the problem can be divided into a scientific component of determining what health risks may be, and a political one of determining what risks are felt to be acceptable for a given community.

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A third fundamental part of the problem is to determine what health risks to consider. I can present a case for radiofrequency exposure producing a small increase in leukemia, or for a more prevalent impairment of sleep. In my view both are risks which should be avoided. We need a way to move the risk assessment system away from exclusive concern for cancer, if we are to do a good job of assuring health protection.