FREIBURGER APPEAL

Out of great concern for the health of our fellow human beings do we - as established physicians of all fields, especially that of environmental medicine - turn to the medical establishment and those in public health and political domains, as well as to the public.

We have observed, in recent years, a dramatic rise in severe and chronic diseases among our patients, especially:
- Learning, concentration, and behavioural disorders (e.g. attention deficit disorder, ADD)
- Extreme fluctuations in blood pressure, ever harder to influence with medications
- Heart rhythm disorders
- Heart attacks and strokes among an increasingly younger population
- Brain-degenerative diseases (e.g. Alzheimer's) and epilepsy
- Cancerous afflictions: leukemia, brain tumors

Moreover, we have observed an ever-increasing occurrence of various disorders, often misdiagnosed in patients as psychosomatic:
- Headaches, migraines
- Chronic exhaustion
- Inner agitation
- Sleeplessness, daytime sleepiness
- Tinnitus
- Susceptibility to infection
- Nervous and connective tissue pains, for which the usual causes do not explain even the most conspicuous symptoms

Since the living environment and lifestyles of our patients are familiar to us, we can see especially after carefully-directed inquiry a clear temporal and spatial correlation between the appearance of disease and exposure to pulsed high-frequency microwave radiation (HFMR), such as:
- Installation of a mobile telephone sending station in the near vicinity
- Intensive mobile telephone use
- Installation of a digital cordless (DECT) telephone at home or in the neighbourhood

We can no longer believe this to be purely coincidence, for:
- Too often do we observe a marked concentration of particular illnesses in correspondingly HFMR-polluted areas or apartments;
- Too often does a long-term disease or affliction improve or disappear in a relatively short time after reduction or elimination of HFMR pollution in the patient's environment;
- Too often are our observations confirmed by on-site measurements of HFMR of unusual intensity.
Evidence that Electromagnetic Radiation is Genotoxic:
The implications for the epidemiology of cancer and cardiac, neurological and reproductive effects

Dr Neil Cherry

June 2000

For presentations in May to NZ Parliament and June 2000 in Italy, Austria, Ireland and at the European Parliament in Brussels.

Neil.Cherry@ecan.govt.nz

Environmental Management and Design Division
P.O. Box 84
Lincoln University
Canterbury, New Zealand
Figure 45: Summary of observed effects, and the mean levels of the exposure for human studies of exposure to electromagnetic radiation. All epidemiological studies occur below the ICNIRP and New Zealand Standard of allowable exposure.

These genotoxic biological mechanisms strongly support the large number of epidemiological studies that show significant increases of cancer, neurological, cardiac and reproductive health effects from ELF and RF/MW exposure in military, occupation, and residents studies. Altogether they show a causal relationship from EMR exposure and wide-spread adverse health effects. All of these adverse health effects are shown to be significantly increased in multiple epidemiological studies, including many with significant dose-response relationships. This data puts the situation in a very clear light. There are causal relationships between extremely low mean EMR exposures across the spectrum and a wide range of serious adverse health effects.
# Biological and Cancer Safety Limits for Electromagnetic Radiation

## 4 Tables by Frequency

<table>
<thead>
<tr>
<th>Table</th>
<th>Frequency</th>
<th>Common Sources</th>
<th>Metric</th>
<th>Biological and Cancer Safety Limits</th>
<th>Lowest Adverse Human Effects Safety Limits</th>
<th>Heating and Shock Safety Limits</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>30-300 Hz Extremely Low Frequency</td>
<td>power lines, domestic wiring, transformers</td>
<td>Magnetic Field</td>
<td>0.01 µT to 0.1 µT</td>
<td>0.007 µT</td>
<td>100 µT</td>
</tr>
<tr>
<td>B</td>
<td>4-100 kHz Low Frequency Voltage Transients</td>
<td>power lines, domestic wiring, energy saving lights</td>
<td>Magnetic Field</td>
<td>0.025 µT</td>
<td></td>
<td>625 µT</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Electrical Field</td>
<td></td>
<td></td>
<td>87 V/m</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Voltage Transients</td>
<td>30 GS</td>
<td>40 GS</td>
<td></td>
</tr>
<tr>
<td>C</td>
<td>300 kHz - 300 MHz Radio Frequency</td>
<td>radio transmitters, TV transmitters</td>
<td>Magnetic Field</td>
<td></td>
<td></td>
<td>0.052 µT</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Electrical Field</td>
<td>0.394 V/m</td>
<td>&lt; 0.87 V/m</td>
<td>28 V/m</td>
</tr>
<tr>
<td>D</td>
<td>0.3 - 300 GHz Microwave Frequency</td>
<td>mobile phones and masts, DECT cordless phones, WiFi, WiMAX</td>
<td>Electrical Field (peak pulse)</td>
<td>0.02 W/m to 0.6 W/m</td>
<td>0.05 V/m to 0.06 V/m</td>
<td>41 W/M to 61 W/M</td>
</tr>
</tbody>
</table>
Experts: Vatican Radio transmitters 'pose cancer risk'  

By David Willey, BBC News, Rome

There is a "coherent and significant connection" between radiation from Vatican Radio aerials and childhood cancer, researchers have said.

The Italian experts looked at high numbers of tumours and leukaemia in children who live close to Vatican Radio transmitters.

The 60 antennas stand in villages and towns near Rome.

The Vatican said it was astonished and would present contrary views to a court in Rome.

Italian courts have been investigating for 10 years whether of an abnormally high number of deaths from cancer among families living near the aerials just north of the Italian capital can be attributed to electromagnetic radiation.

The 300-page report, ordered by the courts and carried out by Italy's most prestigious cancer research hospital, now concludes that there is a connection between radiation and the cancer incidents.

Some 60 huge steel aerials were erected on farmland owned by the Vatican during the last century.

13 July 2010 AOL: SylviaWright36
Journal of Australian College of Nutritional & Environmental Medicine Vol. 21 No. 1 Ap. 02 concludes:
“...breast, bladder, prostate, lung, colon and cutaneous melanoma cancers are all associated with each other (Ref. 11) refers to radiofrequency EMF....Estonia had a steep increase in the cancer mortality in 1991, the year that the “western” FM radio-frequencies were allowed and introduced all over the country”.
Professors Orjan Hallberg and Olle Johansson

Naila Study – Germany November 2004 – Over 10 years discovered a threefold increase in cancers over 5 years at a distance of up to 400 metres from base station.

Wolf and Wolf – April 2004 – discovered a four-fold increase within 350 metres and a tenfold increase among women (other research shows women suffer most) from a similar study during the same month – this time in Israel.

The ECOLOG study by T-Mobil – Conclusion: A cancer-promoting effect of high frequency electromagnetic fields...used by cellular telephone technology.

“The Influence of being physically near to a cellphone transmission mast on the incidence of cancer”. 17th April 2004 -
Ten year study. Conclusion – cancer cases are significantly higher in people living up to 400m from a transmitter than those without a transmitter.
Professors Eger – Hagen – Lucas – Vogel – Voit

In addition, the Bio-Initiative Report (review of over 2,000 studies) concluded: “...the existing public safety limits are inadequate to protect public health...”
www.bioinitiative.org

Case-Control study on cancer and a NMT 450 mobile phone base station in Austria.

www.microwavenews.com

The complete Interphone study (13 countries) found a large underestimation in the risk of cancer associated with electromagnetic radiation.

NB: We are still waiting for the release of the complete findings of the Interphone Study – more than 2 years on! http://www.economist.com/science/displaystory.cfm?story_id=12295222


The REFLEX Study (ground breaking in that it shows a genotoxic effect from electromagnetic radiation (i.e. cancer).

Joining the Dots – an overview of public health (from EMR). Cancer trends during the 21st Century. This report concludes – over 47 pages of studies – “…antennae should not be erected in residential areas or in the vicinity of schools/child care centres...”. Sarah Benson
EPIDEMIOLOGICAL EVIDENCE FOR A HEALTH RISK FROM MOBILE PHONE BASE STATIONS

Vini G. Khurana, Lennart Hardell, Joris Everaert, Alicja Bortkiewicz, Michael Carlberg, Mikko Ahonen

ABSTRACT

Human populations are increasingly exposed to microwave/radiofrequency (RF) emissions from wireless communication technology, including mobile phones and their base stations. By searching PubMed, we identified a total of 10 epidemiological studies that assessed for putative health effects of mobile phone base stations. Seven of these studies explored the association between base station proximity and neurobehavioral effects and three investigated cancer. We found that eight of the 10 studies reported increased prevalence of adverse neurobehavioral symptoms or cancer in populations living at distances < 500 meters from base stations. None of the studies reported exposure above accepted international guidelines, suggesting that current guidelines may be inadequate in protecting the health of human populations. We believe that comprehensive epidemiological studies of longterm mobile phone base station exposure are urgently required to more definitively understand its health impact. Key words: base stations; electromagnetic field (EMF); epidemiology; health effects; mobile phone; radiofrequency (RF); electromagnetic radiation.

Full Text: PDF NEW
A Note from the Editor:

The article "Microwaves imitate Pesticides" is presented to stimulate discussion. It is authored by the director of a national support group for individuals with sensitivity to low levels of non-ionizing radiation (the Electrical Sensitivity Network), who contacted the RMQ requesting that their viewpoint be presented. While most of the past RMQ articles have been written by DOE technical staff involved in nuclear energy activities, the DOE does include arms which transmit energy of this kind and the RMQ is open to publishing differing perspectives.

The similarity between the effects of microwaves and those of pesticides may be coincidental or it might be a result of common interactions with enzymes that affect the transmission of nerve impulses. More research is needed to determine the mechanisms of action for both pesticides and microwaves.

The Electrical Sensitivity Network is a national support and advocacy group for people with electrical sensitivity. Goals of the Network include: 1) assisting the ES in locating medical, legal, housing and EMF-reduction resources; 2) idea-sharing on a regional basis; 3) informing the public about ES and health hazards of EMFs; and 4) encouraging development of EMF reduction technology. To achieve these goals, the Network is developing a resource directory with regional contact lists to help people find ES others in their area, and an International newsletter, Electrical Sensitivity News, to expand the networking and information exchange process.

MICROWAVES IMITATE PESTICIDES

By Lucinda Grant
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As director of the national support group Electrical Sensitivity Network, I have become very interested in why some people develop electrical sensitivity (ES), which means that they are ill when exposed to low-level non-ionizing radiation. The sources of electromagnetic exposure triggering symptoms in the ES include power lines, household appliances, computers, lighting, household wiring, and any of the various radio and microwave transmitting devices in our environment.

Several electrically sensitive (ES) patients have mentioned organophosphate pesticide poisoning as the specific event that led to their multiple chemical sensitivity (MCS) symptoms and subsequently to their being electrically sensitive. Although not all cases of ES report chemical exposure related to their ES onset, the MCS-related ES cases provide us with an interesting link to radiation health effects by understanding chemical effects. For example, a well-known health effect of organophosphate pesticides (Malathion, Parathion, etc.) is their ability to reduce the function of the body's cholinesterase enzyme.\textsuperscript{1,2,4} Cholinesterase is an important nervous system enzyme that prevents excessive accumulation of acetylcholine, a neurotransmitter.\textsuperscript{1,4,5} By inhibiting cholinesterase and thus causing an excess of acetylcholine, organophosphate pesticides overstimulate the nervous system, resulting in death in cases of acute poisoning.\textsuperscript{2,3,5} These pesticides are chemically related to the even more deadly military nerve gases, such as Sarin, which use the same mechanism of action — inhibiting cholinesterase.\textsuperscript{6}

Symptoms of organophosphate poisoning include nausea, muscle weakness, memory and concentration problems, chest pain, breathing difficulty, headache, blurred vision, increased sweating, etc.\textsuperscript{2,5,7} A recent ES survey reported the five most common ES symptoms as:

- confusion, poor concentration, and/or memory loss
- skin itch, rash, flushing, burning and/or tingling
- fatigue, weakness
- headache
- chest pain or heart problems\textsuperscript{8}

Of these five symptoms, all except the skin problems match the symptoms of cholinesterase inhibition from organophosphate pesticide poisoning.

Soviet research of electromagnetic radiation health effects in the 1960s and 1970s found that non-thermal electromagnetic field (EMF) exposures could produce effects similar to other toxins, such as chemicals and heavy metals.\textsuperscript{9}

One consistent finding from the Soviet research was that when humans and animals were exposed to radio wave or microwave frequency, this radiation would inhibit cholinesterase, producing an excess of acetylcholine — the same effect as organophosphate pesticides.\textsuperscript{10,11,12}

Some Soviet EMF researchers specifically pinpointed this enzyme effect as a significant factor leading to nervous system dysfunction.\textsuperscript{5,12,13}

In a 1973 Soviet study, blood cholinesterase reduced to below 70% of pre-exposure levels in rats and rabbits exposed to the 30-300 MHz range at intensities of only 0.11mW/cm\textsuperscript{2} or 0.019mW/cm\textsuperscript{2} for four months.\textsuperscript{7} According to the U.S. National Institute of Occupational Safety and Health (NIOSH), when organophosphate pesticide exposure results in a decrease of blood cholinesterase to less than 70% of the pre-exposure level, that exposure is considered unacceptable due to the health hazard.\textsuperscript{3 A} A 1994 Soviet study by the Russian Institute of Cell Biophysics produced an average drop in brain cholinesterase to 70% of pre-exposure levels in rats after one 60-minute exposure to pulsed 880 MHz at 1.5mW/cm\textsuperscript{2}.\textsuperscript{14}

Also, a U.S. government study conducted in cooperation with Soviet researchers in an effort to replicate Soviet findings discovered that microwaves of
Breast Cancer Fund Study Blames Rise of Breast Cancer on Radiation + Environmental Toxins

The Breast Cancer Fund (a non-profit that works to identify environmental links to breast cancer) just came out with a new report entitled: The State of the Evidence: 2008. The report concludes that increased radiation exposure, combined with the vast amounts of toxic chemicals in the environment, are the primary culprits in the rise of breast cancer incidence.

The report notes that exposures during fetal and early childhood development to carcinogens through plastics, estrogen-mimicking substances and other chemicals may increase the risk of breast cancer, and further warns that lifelong chronic exposure to radiation and chemicals are increasing risk.

This study is an important addition to the body of work that has -and is being- done by the Institute for Energy and Environmental Research and the Radiation and Public Health Project.

A copy of the Executive Summary and an article on the study are attached.

March 2008

~Consequences – low level – breast cancer

State of the Evidence 2008 Executive Summary

Edited by Janet Gray, Ph.D.

Breast cancer strikes more women in the world than any other type of cancer except skin cancer. In the United States, a woman's lifetime risk of breast cancer has increased steadily and dramatically over the decades of the 20th century. Between 1973 and 1998, breast cancer incidence rates in the United States increased by more than 40 percent. Today, a woman’s lifetime risk of breast cancer is one in eight.
The head of cancer registry in Berlin, Roland Stabenow informed the residents of Steinbach-Hallenberg in a recent conference, that there is an increase of 7 fold in breast cancer in their area (an area with cellular antennas). He emphasized that this is not a proof that the increase is linked to the antennas. He also talked about the causes of breast cancer. The attention to the place was drawn after a map was prepared by the residents and the cases are near the antennas.

For more details contact
post(at)buerger-gegen-esmog.de

Informant: Iris Atzmon

Riddle of 'frightening' breast cancer epidemic
http://omega.twoday.net/stories/2746563/

http://omega.twoday.net/search?q=Cancer+Cluster
Starmail - 21. Sep, 15:48
Mobile Phone Use and the Risk for Malignant Brain Tumors: A Case-Control Study on Deceased Cases and Controls

Lennart Hardella Michael Carlberg Kjell Hansson Mild

*Department of Oncology, University Hospital, Örebro, and ‡Department of Radiation Physics, Umeå University, Umeå, Sweden

Key Words
Glioma • Astrocytoma • Oligodendroglioma • Cellular phone • Cordless phone

Abstract
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 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.

Introduction
Almost everyone has a mobile (cellular) telephone nowadays and there may be more than one phone per person in many countries. The proliferation of use has not been tempered with health concerns, rather on the technical development in this area. Since the brain is the organ with the highest near-field exposure to microwaves during the use of both mobile and desktop cordless phones an increased risk for brain tumors has been of concern. Several studies have shown an association, and our studies were among the first to clearly indicate an increased risk for both malignant brain tumors and acoustic neuroma for long-term use of...
Burbank ACTION (Against Cell Towers In Our Neighborhood)

Horst Eger & Manfred Jahn Study Feb 2010

This study shows a significantly increased health risk in the vicinity of cell phone base stations and underscored the inadequacy of the currently accepted exposure limits:

Horst Eger and Manfred Jahn: "Spezifische Symptome und Mobilfunkstrahlung in Selbitz (Bayern) – Evidenz für eine Dosiswirkungsbeziehung" ("Specific Health Symptoms and Cell Phone Radiation in Selbitz (Bavaria, Germany)—Evidence of a Dose-Response Relationship"), published in umwelt-medizin-gesellschaft, Feb. 2010, pages 130-139. The publishers of the journal have affirmed that this study was a peer-reviewed by members of their scientific board. This study is now available in English.*

In this Jan. 2009 health survey, 251 respondents residing near wireless transmitters located on a building completed a questionnaire about their health. Participants were then classified into groups: those living 100 m, 200 m, 300 m and 400 m from the cell phone base station, and a control group living beyond 400 m. The study found significant relationships between exposure levels and symptoms. Those receiving higher exposure levels (living closer to the wireless facility) reported more symptoms.

Symptoms included: sleep problems, depression, cerebral symptoms, infections, skin problems, cardiovascular problems, joint problems, problems of the visual and auditory system, hormone system and gastrointestinal tract. In their discussion, the authors cited and reviewed several national and international...
Epidemiological Evidence for a Health Risk from Mobile Phone Base Stations

VINI G. KHURANA, LENNART HARDELL, JORIS EVERAERT, ALICJA BORTKIEWICZ, MICHAEL CARLBERG, MIKKO AHONEN

Human populations are increasingly exposed to microwave/radiofrequency (RF) emissions from wireless communication technology, including mobile phones and their base stations. By searching PubMed, we identified a total of 10 epidemiological studies that assessed for putative health effects of mobile phone base stations. Seven of these studies explored the association between base station proximity and neurobehavioral effects and three investigated cancer. We found that eight of the 10 studies reported increased prevalence of adverse neurobehavioral symptoms or cancer in populations living at distances < 500 meters from base stations. None of the studies reported exposure above accepted international guidelines, suggesting that current guidelines may be inadequate in protecting the health of human populations. We believe that comprehensive epidemiological studies of long-term mobile phone base station exposure are urgently required to more definitively understand its health impact. Key words: base stations; electromagnetic field (EMF); epidemiology; health effects; mobile phone; radiofrequency (RF); electromagnetic radiation.

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INTRODUCTION

Mobile phone base stations are now found ubiquitously in communities worldwide. They are frequently found near or on shops, homes, schools, daycare centers, and hospitals (Figure 1). The radiofrequency (RF) electromagnetic radiation from these base stations is regarded as being low power; however, their output is continuous. This raises the question as to whether the health of people residing or working in close proximity to base stations is at any risk.

METHODS

By searching PubMed and using keywords such as base station, mast, electromagnetic field (EMF), radiofrequency (RF), epidemiology, health effects, mobile phone, and cell phone, and by searching the references of primary sources, we were able to find only 10 human population studies from seven countries that examined the health effects of mobile phone base stations. Seven of the studies explored the association between base station proximity and neurobehavioral symptoms via population-based questionnaires; the other three retrospectively explored the association between base station proximity and cancer via medical records. A meta-analysis based on this literature is not possible due to differences in study design, statistical measures/risk estimates, exposure categories, and endpoints/outcomes. The 10 studies are therefore summarized in chronological order (Table 1).

RESULTS AND DISCUSSION

We found epidemiological studies pertaining to the health effects of mobile phone base station RF emissions to be quite consistent in pointing to a possible adverse health impact. Eight of the 10 studies reported increased prevalence of adverse neurobehavioral symptoms or cancer in populations living at distances < 500 meters from base stations. The studies by Navarro et al., Santini et al., Gadzicka et al., and Hutter et al. reported differences in the distance-dependent prevalence of symptoms such as headache, impaired concentration, and irritability, while Abdel-Rassoul et al. also found lower cognitive performance in individuals living ≤10 meters from base stations compared with the more distant control group. The studies by Eger et al. and Wolf and Wolf reported increased incidence of cancer in persons living for several years < 400 meters from base stations. By contrast, the large retrospective study by Meyer et al. found no increased incidence of cancer near base stations in Bavaria. Blettner et al. reported in Phase 1 of their study that more health problems were found closer to base stations, but in Phase 2 concluded that measured EMF emissions were not related to adverse health effects (Table 1).

Each of the 10 studies reviewed by us had various strengths and limitations as summarized in Table 1. Per-
This study shows a significantly increased health risk in the vicinity of cell phone base stations and underscored the inadequacy of the currently accepted exposure limits:

Horst Eger and Manfred Jahn: "Spezifische Symptome und Mobilfunkstrahlung in Selbitz (Bayern) – Evidenz für eine Dosiswirkungsbeziehung" ("Specific Health Symptoms and Cell Phone Radiation in Selbitz (Bayern, Germany)—Evidence of a Dose-Response Relationship"), published in umwelt-medizin-gesellschaft, Feb. 2010, pages 130-139. The publishers of the journal have affirmed that this study was a peer-reviewed by members of their scientific board. This study is now available in English.*

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- This work provides a protocol for surveys of medical practitioners and municipality administrations to estimate possible health effects of mobile telephone basic stations situated near population residents.
- A clearly increasing incidence of disease is already taking place far below legally binding exposure guideline limits.
- From a legal perspective, it should be noted here that the current exposure limit regulations basically do not provide sufficient protection against health risks.
- It is a physician's responsibility—not bound by directives—to work towards the preservation of the natural basis of life regarding human health. As representatives of public health agencies, state offices such as the Public Health Department, the State Office for the Environment, and the Bavarian Ministry of the Environment as well as higher-ranking government levels such as the Federal Ministry of the Environment and the European Union are invited to specify the cause of this possible slow poisoning.

English Version of Original Study: to view/download, click Eger Jahn "Attachments" below; study was translated by Katharina Gustavs.


* Special thanks to: Dr. Horst Eger and Dr. Manfred Jahn and the publisher for making this English translation possible; Ms. Katharina Gustavs for her English translation; Nancy Evans for recommending Katharina Gustavs translate this important study. (Thank you, Drs. Eger and Jahn, for sending us this English version to share with our local officials here in Burbank, California, and allowing us to extend your study's reach to other English-language readers around the globe.)

Attachments (1)

- EgerJahnSELBITZSTUDY 2010EnglishFinalmutOriginalQuelle.pdf - on Sep 23, 2010 4:24 PM by K lwata (version 1)

I could not access the English version, Barrie. Will try again - may be a useful to submit to GPs - and to use as a template for questionnaires.

https://sites.google.com/site/nocelltowerinourneighborhood/home/horst-eger-manfred... 01/01/202
An eminent Swedish professor at the prestigious Karolinska Institute in Stockholm is being blocked from completing replication experiments aimed at seeking a definitive answer to the effects of electromagnetic frequencies on the human body.

Prof. Ole Johansson, a long-time critic of wireless communications technology, based on his research, has been informed that his office and lab are required for other purposes, effectively blocking privately supported experiments scheduled for August and September. Johansson is associate professor and head of department at the Experimental Dermatology Unit in the institute’s Department of Neuroscience in Stockholm. He is also a professor with the Swedish Royal Institute of Technology.

Johansson first came to the attention of the public when his work led to improved computer screens to protect office workers from what he found as the adverse effects of radiation emitted from monitors. Next month’s planned experiments are intended to replicate the experiments of Dr. Magda Havas of Trent University, Canada whose work led to the cancellation of WiFi in San Francisco and the recent new law requiring warning labels on mobile phones. San Francisco has yet to address the issue of radiation from mobile phones and other telecommunications masts.

Observers claim the current controversy at the Karolinska Institute follows Johansson’s efforts to assist activists in Ireland opposed to the proliferation of telecommunications masts to protect children who absorb up to 75 percent of this type of radiation into their brains. During a visit to Ireland he was quoted as saying “No level of radiation is safe.”

The cash-strapped Irish government through the communications regulatory body, ComReg, has introduced what it calls “Test and Trial,” a program where companies are invited to test their wireless equipment in a live environment. Most recently, Ericsson, the Swedish telecommunications giant conducted tests in the 2.3-GHz band at speeds of up to 60 Mbit/sec using a license issued under ComReg’s Test and Trial licensing program. The experiment used TD-LTE, originally provided by China Mobile using paired spectrum with separated channels as a co-channel to Intel’s WiMax signal. The TD-LTE technology provides high-speed broadband services which can be used to support services such as high-definition television, video conferencing and many others without the need for new devices. Ericsson has two Irish addresses: one in Dublin and one Software Campus at Athlone, Co. Westmeath, the company’s first R&D lab outside Sweden.

The test was conducted using a “large black box” broadcasting from a taxi. No mention of public safety of the test was made by Ericsson. Two weeks ago, the city of San Francisco passed the first law in the US requiring retailers to display the amount of radiation given off by mobile phones. In retaliation after the vote, the CTIA wireless trade group called off its Autumn show set for San Francisco. The city stands to lose $20 million in economic activity generated by the 3-day Enterprise and Applications Show, attended by 68,000 visitors. The show has been staged in San Francisco five of the last seven years.

Last week US President Barack Obama signed a memorandum doubling the number of frequencies available for wireless devices. The move is intended to create jobs and boost investment in the $153 billion wireless market over the next 10 years. The availability of a bigger chunk of wireless spectrum would allow faster delivery of data and video onto smartphones and other next-generation devices. Digital television is generally regarded as particularly dangerous by the public community due to the large volume of information incorporated into the carrier waves. Obama’s memo jump-starts an effort to make available over the next 10 years 500 megahertz of government and commercial spectrum, which reflects a recommendation by the Federal Communications Commission in its National Broadband Plan released in March. In the nation’s largest cities, local TV stations use about 150 megahertz, according to the National Broadband Plan.

Researchers such as Dr. George Carlo, of the Science and Public Policy Institute at the Institute for Healthful Adaptation in Washington, D.C. assert that it is not the microwaves themselves but modulated microwaves which carry information that are the cause of the drastic increase in a number of diseases. In Ireland, for example, in a request for funding irradiation examination rooms for cancer patients, the Royal College of Physicians in Ireland (RCP) predicted last week that by the year 2025, half the population will suffer from some form of cancer.

In April, the European Academy for Environmental Medicine issued the Wuerzburg Appeal, outlining the increasing prevalence of chronic non-epidemic illnesses such as multiple chemical sensitivity (MCS), chronic fatigue syndrome (CFS), fibromyalgia (FM), as well as cardiovascular diseases, metabolic syndrome, neurodegenerative diseases, auto immune diseases and cancer. These multi-system diseases are considered chronic inflammatory processes influenced by environmental factors including chemical pollutants, biological infectious agents and electromagnetic field (EMF) triggers.

Johansson’s difficulties began last year when he was approached by Stefan Cullheim, head of the neuroscience department, who informed the professor he was to vacate his premises immediately because they were to be used as an “animal house for fermats”. Johansson refused point blank and the issue was dropped. The professor became ill and required surgery. Still convalescing, he returned to work and was again confronted by Cullheim, this time with plans to use his office and laboratory imaging facility.

Commenting on the Karolinska Institute’s attempted closure of Johansson’s research facilities, Dr. Carlo, said, “Olle Johansson’s lab is one of the few remaining places in the world where independent, non-industry funded research on EMF health effects is being done. It would be a tragedy if we were to be suppressed from carrying on his work.”

The Karolinska Institute has a long history of intellectual scientific rigor as well as honours. Each year the Nobel Assembly of 50 Karolinska professors selects the nominees for the world famous Nobel awards in the fields of physiology or medicine. Prof. Harriet Wallberg-Henriksson, president of the Karolinska Institute, and Prof. Bernd Huber, chairman of the League of European Research Universities, have not responded to queries regarding Johansson’s status, research, or the timing of the proposed closure of his lab.

Karolinska ‘Nobel Prize’ Institute threatens work of noted wireless safety researcher

Created: 9 Jul 2010

An eminent Swedish professor at the prestigious Karolinska Institute in Stockholm is being blocked from completing replication experiments aimed at seeking a definitive answer to the effects of electromagnetic frequencies on the human body.

Prof. Ole Johansson, a long-time critic of wireless communications technology, based on his research, has been informed that his office and lab are required for other purposes, effectively blocking privately supported experiments scheduled for August and September. Johansson is associate professor and head of department at the Experimental Dermatology Unit in the institute’s Department of Neuroscience in Stockholm. He is also a professor with the Swedish Royal Institute of Technology.

Johansson first came to the attention of the public when his work led to improved computer screens to protect office workers from what he found as the adverse effects of radiation emitted from monitors. Next month’s planned experiments are intended to replicate the experiments of Dr. Magda Havas of Trent University, Canada whose work led to the cancellation of WiFi in San Francisco and the recent new law requiring warning labels on mobile phones. San Francisco has yet to address the issue of radiation from mobile phones and other telecommunications masts.

Observers claim the current controversy at the Karolinska Institute follows Johansson’s efforts to assist activists in Ireland opposed to the proliferation of telecommunications masts to protect children who absorb up to 75 percent of this type of radiation into their brains. During a visit to Ireland he was quoted as saying “No level of radiation is safe.”

The cash-strapped Irish government through the communications regulatory body, ComReg, has introduced what it calls “Test and Trial,” a program where companies are invited to test their wireless equipment in a live environment. Most recently, Ericsson, the Swedish telecommunications giant conducted tests in the 2.3-GHz band at speeds of up to 60 Mbit/sec using a license issued under ComReg’s Test and Trial licensing program. The experiment used TD-LTE, originally provided by China Mobile using paired spectrum with separated channels as a co-channel to Intel’s WiMax signal. The TD-LTE technology provides high-speed broadband services which can be used to support services such as high-definition television, video conferencing and many others without the need for new devices. Ericsson has two Irish addresses: one in Dublin and one Software Campus at Athlone, Co. Westmeath, the company’s first R&D lab outside Sweden.

The test was conducted using a “large black box” broadcasting from a taxi. No mention of public safety of the test was made by Ericsson. Two weeks ago, the city of San Francisco passed the first law in the US requiring retailers to display the amount of radiation given off by mobile phones. In retaliation after the vote, the CTIA wireless trade group called off its Autumn show set for San Francisco. The city stands to lose $20 million in economic activity generated by the 3-day Enterprise and Applications Show, attended by 68,000 visitors. The show has been staged in San Francisco five of the last seven years.

Last week US President Barack Obama signed a memorandum doubling the number of frequencies available for wireless devices. The move is intended to create jobs and boost investment in the $153 billion wireless market over the next 10 years. The availability of a bigger chunk of wireless spectrum would allow faster delivery of data and video onto smartphones and other next-generation devices. Digital television is generally regarded as particularly dangerous by the public community due to the large volume of information incorporated into the carrier waves. Obama’s memo jump-starts an effort to make available over the next 10 years 500 megahertz of government and commercial spectrum, which reflects a recommendation by the Federal Communications Commission in its National Broadband Plan released in March. In the nation’s largest cities, local TV stations use about 150 megahertz, according to the National Broadband Plan.

Researchers such as Dr. George Carlo, of the Science and Public Policy Institute at the Institute for Healthful Adaptation in Washington, D.C. assert that it is not the microwaves themselves but modulated microwaves which carry information that are the cause of the drastic increase in a number of diseases. In Ireland, for example, in a request for funding irradiation examination rooms for cancer patients, the Royal College of Physicians in Ireland (RCP) predicted last week that by the year 2025, half the population will suffer from some form of cancer.

In April, the European Academy for Environmental Medicine issued the Wuerzburg Appeal, outlining the increasing prevalence of chronic non-epidemic illnesses such as multiple chemical sensitivity (MCS), chronic fatigue syndrome (CFS), fibromyalgia (FM) as well as cardiovascular diseases, metabolic syndrome, neurodegenerative diseases, auto immune diseases and cancer. These multi-system diseases are considered chronic inflammatory processes influenced by environmental factors including chemical pollutants, biological infectious agents and electromagnetic field (EMF) triggers.

Johansson’s difficulties began last year when he was approached by Stefan Cullheim, head of the neuroscience department, who informed the professor he was to vacate his premises immediately because they were to be used as an “animal house for fermats”. Johansson refused point blank and the issue was dropped. The professor became ill and required surgery. Still convalescing, he returned to work and was again confronted by Cullheim, this time with plans to use his office and laboratory imaging facility.

Commenting on the Karolinska Institute’s attempted closure of Johansson’s research facilities, Dr. Carlo, said, “Olle Johansson’s lab is one of the few remaining places in the world where independent, non-industry funded research on EMF health effects is being done. It would be a tragedy if we were to be suppressed from carrying on his work.”

The Karolinska Institute has a long history of intellectual scientific rigor as well as honours. Each year the Nobel Assembly of 50 Karolinska professors selects the nominees for the world famous Nobel awards in the fields of physiology or medicine. Prof. Harriet Wallberg-Henriksson, president of the Karolinska Institute, and Prof. Bernd Huber, chairman of the League of European Research Universities, have not responded to queries regarding Johansson’s status, research, or the timing of the proposed closure of his lab.
W.H.O. EMF Database

- Epidemiological studies on mobile phone base stations

  - 5 studies papers referenced on WHO
    - Santini 2003: Microwave Syndrome / 300 m
    - Navarro 2003: Microwave Syndrome
    - Wolf 2004: Cancer risk x 4
    - Eger 2004: Cancer risk x 3
    - Siegriest 2005: Psychological factors

  - 3 reports non available
  - 5 studies ongoing

- To this should be added 5 studies available on PUBMED
  - Bortkiewicz 2004: Microwave Syndrome
  - Hutter 2004: Absence of psychological factors
  - Hutter 2006: Risk as from 0.1 Volt/meter
  - Abdel-Rassoul 2006: Neuro-behavioural complaints
  - Schuz 2006: DECT base station / no risk of glioma
Radiation Protection Division

Definition, Epidemiology and Management of Electrical Sensitivity

Report for the Radiation Protection Division of the Health Protection Agency

N Irvine
REGIONAL EPIDEMIOLOGIST, CDSC NORTHERN IRELAND, HPA BELFAST

NOV 2005
Overall the most common symptoms for ES were various neurasthenic (fatigue-type) symptoms, headache and skin symptoms.

The relative prevalence of different symptoms differed between European countries, however. Nervous system symptoms were reported by COMs and SAGs in all countries as among the most common symptoms (with the exception of the Swedish SAG). The second most common group was skin symptoms. Geographical variation was evident in this case, with substantial reporting from Finland, Iceland, Norway and Sweden, and very limited or none at all from other countries. The one UK COM which responded to this section of the questionnaire reported only nervous system symptoms.

Sufferer/advocate experience
Sufferers, their support groups and other ES advocates tend to describe a much wider range of symptoms and diseases as ES. One comprehensive example is that provided by Philips and Philips\(^{20}\) (Box 3). The majority of this description is referenced to 'research by a Swedish trade union' in 1993 and 1996.

The range of associations also extends to reports of sufferers inadvertently interfering with electrical equipment function. Smith reports that one patient made a robotic system

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**BOX 3 Symptoms in ES sufferers\(^{20}\)**

| Eye: | smarting, irritation, pain, grittiness, visual difficulty |
| Skin: | dryness, redness, tingling, rashes |
| Face and head: | swollen face, blisters, warmth, burning sensation, dry mucous membranes, swelling of nose, throat, ear and sinuses, blocked ears, nasal itching, abnormal thirst, facial pain, metallic taste, headaches, loss of memory, depression, buzzing sound |
| Joint, muscle, limb and nerve sensations: | aches, pain, numbness, weakness, prickling sensations, cramp – can lead to chronic severe pain, fibromyalgia |
| Tiredness and dizziness: | abnormal tiredness, weakness, tremor, faintness and dizziness |
| Ingestion and digestion disturbances: | dry mouth, loss of appetite, nausea, thirst, taste loss, gagging, sickly feeling, stomach upset, bowel disturbance |
| Breathing: | shallow laboured breath, breathlessness, pressure in chest, intolerance to perfume |
| Haematological: | nosebleeds, blood pressure changes |
| Cognitive: | unable to think, difficulty concentrating, short-term memory loss, missing time, blackouts |
| Psychological: | extreme rage, violence, destructiveness, irritability, feeling hostile, crying, depressed, unsociable, withdrawn, suicidal tendencies, anxiety, hysteria, feeling insane, out of control, mind interfered with |
| Behavioural disturbances: | rolling on the floor, restless, agitated, disturbed, spontaneous snapping out of neck vertebrae, lower backache, 'poltergeist' phenomena |
| Others: | impending influenza feeling, weight gain, low body temperature and pulse rate, lupus-like symptoms, abdominal pressure and pain, paralysis, balance problem, body/muscle spasms, convulsions, confusion, sleep disturbance, increased temperature in the groin and rectal areas, rectal twitching and pain, loss of libido, feel vibration from surrounding walls, loss of sense of touch, exquisite sensitivity to daylight, hyperaesthesia |
| Associated conditions: | include thyroid disease, myasthenia, Sjogrens, immune system abnormalities and resonance migraines. The growth of bacteria and yeasts is affected by specific frequencies |
Pop Star, Michael Jackson's death sent shockwaves across America and around the world as people grieved at the harrowing news of his death by cardiac arrest. It was alleged that within minutes of receiving his 11:30 AM injection of a prescribed painkiller called, Demerol, he went into respiratory failure.

The staff at the MCHC (pronounced McChe) Health Epcenter at University Central Cincinnati, OH, led by Dr. Rhoda Zione Alale, aka Dr. "A," a Board, Certified Health Physician, were griefstricken also. They ask the question: Did the doctor do a baseline evaluation for respiratory distress which is symptomatic for too much of the drug or the drug being given too fast? It is assumed that the drug was administered IV because of his immediate respiratory distress which is symptomatic for too much of the drug or the drug being given too fast. His respiratory distress and heart attacks can happen in laboring mothers and newborns, too. IV Demerol is given too fast or too much. Narcan can reverse this also. If Michael's doctor administered Narcan, WHY didn't he call 911 immediately?... instead of 40 minutes later?

Medical research has documented so much disease process from EMF exposure that California’s Department of Public Health and Community Advocates have been proactive in getting the word out. Warning signs are posted in hotels and at gas stations warning the public about potential absorption and injuries from EMF and chemicals. THE GAS STATION SIGNS READ...

DANGER ELECTROMAGNETIC STATIC EXPLOSION
Do not return to your car while refueling. Electromagnetic static in your body can cause an explosion resulting in your injury or death.

The World Health Organization has now issued two new medical diagnoses, "Electromagnetic Hypersensitivity (EHS) and Multiple Chemical Sensitivity (MCS)" because of consumer massive exposure to environmental toxins. Michael Jackson may have had both. The Center for Disease Control (CDC), the National Institutes of Health (NIH) and Food and Drug Administration have all been advising "PRUDENT CAUTION" in the use of cell phones and other electronics because of the potential injury to the cells of body tissue. FREE training has been offered to doctors, nurses and allied health personnel by these agencies to help them enhance their screening skills for early detection. Few doctors, nurses, hospitals, and clinics, however, have engaged the training. Congress passed legislation also to form the National Environmental Education Foundation to help foster curriculum change in colleges and universities to enhance the skills of health care practitioners in testing for chemical and radiation toxicity. The symptoms of EMF radiation sensitivity are head-clenching headaches, swelling of blood vessels to the heart and lungs, bloated blood vessels to the heart and lungs from the swelling, asthma, autism in the unborn child of pregnant mothers, fibromyalgia, sustained back pain, psychosis, neuritis, paralysis, bipolar, schizophrenia, sustained aggression, memory loss, incontinence, dementia, liver kidney diseases, alterations of the brain Delta, Theta, Alpha, and Beta waves and cancers of every kind. These dynamics lead many into drug and alcohol abuse.

Michael had many of the symptoms. In recent months, his bizarre behavior and paranoid style: Brain Theta wave alterations and his recent inability to sing on key could be altered Alpha waves from prolonged exposure to EMF or chemicals. Additionally, how much radiation did he have in his home from wireless surveillance cameras and other electronics as well? Many entertainers are poisoned from these high levels of EMF, both in studio and at home.

Former Vice President Al Gore is joined by Dr. George Carlo, PhD, JD, Dr. Ronald Herberman, MD (University of Pittsburgh), and Dr. Rhoda Zione Alale PhD, DHP, RN. Their message is simple "SAVE YOURSELVES...BLOCK EMF! REDUCE CARBON FOOTPRINTS!...USE PRUDENT CAUTION WITH CELL PHONES AND ELECTRONICS!

Additionally, Dr. Alale, the 2008 Recipient of the Congressional Order of Merit Award, is a Presidential Commissioner. She directs the effort of the Epcenter to support the EPA initiative C.A.R.E. (Community Action for Renewed Environments) to reduce air and radiation toxicity. They evaluate environments for gas, chemical, and radiation toxins and test people for toxicity from them. She is the inventor of the eStas™, "ELF™, and "ELF 3™ Test to screen for "risks" of electromagnetic radiation poisoning.
May 31, 2007

Board of Supervisors, City and County of San Francisco

Case No. 2007.0097E
San Francisco Citywide Wireless Broadband Internet Access Network

Analysis of Health and Environmental Effects of Proposed San Francisco Earthlink Wi-Fi Network

With the advent of this proposal, San Francisco is considering converting the city into a wireless zone. Whatever decision is made should be based on the best available scientific evidence. Wi-Fi simply has not been around long enough to know how these particular frequencies and intensities are likely to affect people who are exposed to them on a daily basis for years at a time. San Francisco is on the forefront of a large population study with some unwilling participants.

The following pages present guidelines for radio frequency radiation in various countries; scientific studies that document the adverse effects of living near cell phone antennas (it is the closest we have to Wi-Fi antennas) for both humans and animals; and laboratory studies that demonstrate the harmful effects of radio frequency radiation. The levels showing adverse biological/health effects are compared to FCC guidelines and to calculations of likely exposure in San Francisco attributed to the Earthlink Wi-Fi Network as discussed in “Earthlink-Proposed San Francisco-Wide Wi-Fi Network: Observations and Calculations for Relation to Exposure Limits” prepared by Mitch Maifeld of Zenzic Research.

Many jurisdictions have had to deal with this issue and some of their recommendations regarding placement of radio frequency transmitters are also presented. While these apply to cell phone antennas they are relevant to Wi-Fi antennas. Physicians and scientists from around the world are asking governments to review the existing guidelines and to revisit the use of this technology to ensure its safety. These resolutions are summarized in the text and are presented in full in the Appendix.
The study in Spain was repeated and this time exposure to radio frequency radiation was recorded. The scientists reported the following symptoms all statistically significant within 50 to 150 m of the cell phone antenna at an average power density of $0.34 \pm 0.19 \text{ microW/cm}^2$: headaches, sleep disturbances, irritability, difficulty concentrating, discomfort, depression, dizziness, appetite loss, and nausea.

Note that $0.11 \text{ microW/cm}^2$ is considerably lower than $1000 \text{ microW/cm}^2$ established by the FCC. This demonstrates that the FCC guideline does not protect the public from radio frequency radiation exposure.

Maifeld (22) calculated different scenarios for exposure of people in San Francisco if the Earthlink Wi-Fi Network becomes operational. All exposures are at levels below FCC guidelines. The San Francisco resident reading SFGate.com on her laptop computer while sitting on her balcony will be used for comparison. Maifeld (22) calculated that she might be exposed to $36 \text{ microW/cm}^2$ from a combination of her laptop computer ($35 \text{ microW/cm}^2$) and ($1 \text{ microW/cm}^2$) the nearest antenna that might be 5 m (16 ft) away. Since every third node has a gateway co-located, in a worse-case scenario she would be exposed to $41 \text{ microW/cm}^2$ with the additional $6 \text{ microW/cm}^2$ coming from the network node location. This value is 400 times higher than the exposure in the Oberfeld study (25). The power density exposure from the antenna alone ($1 \text{ microW/cm}^2$) is above levels where people experienced headaches, sleep disturbances, dizziness, etc at $0.11 \text{ microW/cm}^2$.

4. ELECTROHYPERSONSTIVITY (EHS)

Electrohypersensitivity (EHS) is now recognized by the World Health Organization (WHO) and is defined as:

"... a phenomenon where individuals experience adverse health effects while using or being in the vicinity of devices emitting electric, magnetic, or electromagnetic fields (EMFs). Whatever its cause, EHS is a real and sometimes a debilitating problem for the affected persons, while the level of EMF in their neighborhood is no greater than is encountered in normal living environments. Their exposures are generally several orders of magnitude under the limits in internationally accepted standards." (23)

EHS is classified as a disability in Sweden and health care facilities with low exposure to electromagnetic fields and radio frequency radiation are available for sensitive individuals. Approximately 2% of the population has severe symptoms of EHS (see Appendix 1 for their stories). These people are unable to live in our modern society with its electrical and electronic appliances and with the increasing exposure to radio frequency radiation. Another 35% of the population has moderate symptoms represented by an impaired immune system and by chronic illness.
ELECTROMAGNETIC SENSITIVITY

AND

ELECTROMAGNETIC HYPERSENSITIVITY

(ALSO KNOWN AS
ASTHENIC SYNDROME,
EMF INTOLERANCE SYNDROME,
IDIOPATHIC ENVIRONMENTAL INTOLERANCE - EMF,
MICROWAVE SYNDROME,
RADIO WAVE SICKNESS)

A SUMMARY

Michael Bevington

CAPABILITY BOOKS
Introduction

http://www.ehponline.org/members/2006/9149/9149.html
Open letter to Edmund Stoiber, Prime Minister, Germany

Dr Edmund Stoiber
State Chancellery
PO Box 220011
80535 Munich

Urgent suspicions of serious health damage from pulsed high frequency electromagnetic fields (mobile phone base stations, DECT phones, W-LAN, Bluetooth etc.) at levels below exposure guidelines.

Dear Prime Minister,

Allow me to represent many doctors personally to you.

For eight months doctors in Oberfranken and another places have been making extremely worrying observations of patients, who live in the vicinity of mobile phone base stations. After initial suspicions at locations in Forchheim, Hirschaid, Walsdorf, Memmelsdorf and Bamberg survey measurements were made of 356 such residents in 40 locations, all in Oberfranken. Meanwhile 64 Hofer doctors, 30 Lichtenfelser, 61 Coburger, 20 from Bayreuth and countrywide, added their names to the Bamberger appeal.

The result all these medical findings is as follows.

Many people have become ill with a characteristic combination of symptoms, which is new to us as doctors, at exposure levels far below the guideline limits, which apply only to thermal effects. Residents in the vicinity of masts have one or more of the following symptoms:

Sleep disturbance, tiredness, headache, restlessness, lethargy, irritability, inability to concentrate, forgetfulness, trouble finding words, depressive tendency, noises in the ears, impaired hearing, dizziness, nosebleeds, visual disturbances, frequent infections, sinusitis, joint and muscle pains, feeling deaf, palpitations, increased blood pressure, hormone disturbances, gaining weight, hair loss, nocturnal sweating, nausea.

The following statements strengthened our suspicions:

- Frequently, many residents become sick with these symptoms at the same time, when living near a base station (e.g., Schweinfurt Easelshohe, in Kulmbach, Senioren-Wohnanlage Mainpark, in Hof Koseinenstrasse, in Forchheim, Ortsteil Burk).
- Many patients have reported rapid recovery when removed from exposure (by temporary relocation, removal of the source, screening, disconnection).
- After relocation, doctors have proven during re-examination of the patients, among other things, that blood pressure, heart rhythm, hormone disturbances, visual disturbances, neurological symptoms, and blood profile have returned to normal.
- Many doctors’ families have in the course of the last months removed their DECT phones and were thereafter free among other things from headache, concentration disturbances, dizziness, restlessness, tinnitus, and sleep disturbance.
MICROWAVE PHONES - ARE THEY KILLING US?

by Tim Rifat

As a scientist researching into microwave weapons used on the general public, evidence that the GSM900 microwave network as used by Vodafone and British Telecom is a major health hazard, has come to my attention.

Defense Intelligence Agency (DIA) document entitled: Biological Effects Of Electromagnetic Radiation (Radiowaves and Microwaves) Eurasian Communist Countries, show that microwave frequencies similar to those of the cellular phones can cause health problems in the following areas:

>> Blood
>> Cardiovascular System
>> Cells
>> Central Nervous System
>> Digestive System
>> Glands
>> Metabolism
>> Reproduction
>> Visual System
>> Internal Sound Perception

Equipment to test the frequency and intensity of microwave phones shows that they produce signals similar to microwave ovens. Two Vodafone cellular phones were producing 100mW/cm² and 50 mW/cm² respectively. The danger level for microwave ovens is 5mW/cm² and the Russians regularly used 10 mW/cm² for weapon research. These Vodafone will therefore cause significant health problems if used. A variety of cell phones can be tested to see how dangerous they are.

The GSM1800 system used by Orange uses higher frequency microwaves. Australian scientists found cancer in mice exposed to radiation of this type. The documents in my possession show that microwaves pass deeply into the body and can have a negative effect on the brain and body.

The DIA research dates from 1976, and shows dangers were known about over twenty years ago. The Soviets used frequencies and intensities used by mobile phones (1800 MHz and 900 MHz) as weapons. It is a rule of the intelligence community that you hide things in plain view: getting the public to accept microwave mind control weapons which affect their behaviour under the guise of mobile phones was a stroke of genius. Getting the public to pay for these microwave mind control devices, so their brains and behaviour can be altered, making them more docile and easy to control, was pure diabolical genius.

UK INTELLIGENCE FORCES AND MICROWAVE MIND CONTROL

Microwave weapons that turn people into stressed, confused, submissive

http://home.tiscali.be/hexagonal/rifat1.htm