

ES-UK: ten years of progress

The charity ElectroSensitivity UK was founded at the end of 2003, with two aims: to help people with ES and to educate the public. See page 3 for Jean Philips' recollections from those early days.

Sweden was the first country to have such a national organisation, FEB, in 1989. By then ES had spread from electrical workers - it was first identified in Germany in 1932 among radio operators - into the general population, with the use of computers, mobile phones from 1983 and WiFi from 2000. There are now apparently over 30 national ES groups. FEB is probably the largest, with some 3,000 members and FELO in Norway has 700. ES-UK may be second largest, sending out some 1,000 postal or email Newsletters. Since WiFi became a health issue in 2006 numbers have, sadly, increased at an average of over 15% a year.

If PHE's AGNIR and the UK government had recommended sensible biological radiation limits in the early 1990s, when many studies already showed aspects of the condition, very few members of the general population would be now suffer from ES. Instead ES has become a significant health problem in the UK.

"Voodoo science": more members of PHE's AGNIR and ICNIRP criticised

See page 23 for more criticism of members of PHE's AGNIR, who are directly responsible for the extraordinarily high levels of radiation in the UK, according to Health Secretary, Jeremy Hunt, and thus

also for causing ES through this environmental pollution. Rubin's "pseudo science" psychological claim is criticized yet again, this time in a study on ants. These show sensitivity to EM exposure without seeing tabloid newspapers or TV reports, the alleged cause of ES according to Rubin's controversial hypothesis.

Feychting, another member of AGNIR, and of ICNIRP, is criticised for allegedly not disclosing financial support from industry and government, and for joining the ICNIRP's anti-scientific lobby pleading for "no more research". In addition, Croft, another ICNIRP member and, like Rubin, a psychologist and not a medical doctor, is to be paid by the Australian government to "debunk" critics, despite the fact that in 2007 the WHO declared that ES is not a known psychological disorder, against claims by members of PHE's AGNIR and ICNIRP.

Professor Belpomme: ES patients are only "the tip of the iceberg"

"It is high time that the government tackles the problem. We are facing a real public health problem," according to Prof. Belpomme in FranceInfo on 15th October. He said that ES is a genuine illness which can be diagnosed by tests. He also said things will get worse: "These patients are only the tip of the iceberg." Previously Prof. Belpomme, the head of ARTAC in Paris, said that, depending on the rate of increase in man-made EM pollution, some 10-50% of the general population is likely to become ES by the years 2035-2050.

Dr Rea: EHS "the disaster of the 21st century"

Dr. William Rea, a leading expert on EHS who has treated EHS patients for 40 years, said on 23rd July: "I think it's becoming the disaster of the 21st century."

Mobile and cordless phone radiation: "class 1 carcinogens"

According to Powerwatch news on 16th October 2013, top researchers now consider "RF-EMF emissions from wireless phones are class 1 carcinogens", using the 1965 Bradford-Hill criteria for cause (Hardell L, Carlberg M, Rev Environ Health, 2013).

Paracelsus clinic now treating 3,000 ES patients a year

See page 18 for news about the renowned Paracelsus clinic in Switzerland which now treats 3,000 people with ES per year, nearly a third of its 10,000 patients.

Mercury ban

In October a UN treaty on restricting mercury came into force. Mercury, especially in dental amalgam fillings, can be involved with ES symptoms. See page 16 for how long a government denied environmental poisoning.

Contents

ES-UK news	2
ES-UK: the first decade by Jean Philips	3
ES news	5
ES and WiFi harm	10
Readers' Comments	13
Films, books and websites	14
Radar ill health and Non-thermal EM warfare	15
Mercury and EM dangers	16
Paracelsus Clinic and Dr Rau	18
Earthing, by Roy Riggs	20
Criticisms of PHE's AGNIR and ICNIRP	23
ES experiences	26

Thanks to volunteers

We are again grateful to the small band of volunteers who deal with telephone queries. Some have become involved in complex cases involving social workers and housing issues, all very time-consuming.

BSEM conference, 7th March 2014

The British Society for Ecological Medicine will be holding a conference, entitled "EM Radiation and Health: Evidence, Diagnosis and Management", on Friday 7th March 2014 in London. Speakers will include Prof. Denis Henshaw, Dr John Kelsey, Dr Erica Mallery-Blythe, Dr John McLaren Howard, Dr Jean Monro, Rachel Nicoll, Prof. Martin Pall, Alasdair Philips and Michael Bevington.

New colour leaflet

The introductory colour leaflet about ES has been updated; thanks to Ruth and Gordon for their help. The new one is now available from Brian Stein via Alison. Some people are planning campaigns to inform GP surgeries and libraries – well done if you can help the public by doing this. If you need large numbers of leaflets and can afford it, please make a donation to cover printing costs and postage. Each leaflet costs about 10 pence to print (i.e. £10 for 100) and postage & packing might be £1 for a few dozen.

Chemical-free printing

The September Newsletter was printed on chlorine-free paper with vegetable-based inks, to help people who are chemically sensitive. Thanks to Alison for organising this. Some people affected have to leave other printed material to 'outgas' in a shed or garage before reading it, or have it photocopied.

Utilities and energy companies: which are trustworthy?

Since 29th November 2011 the UK government has allowed people to refuse wireless

'smart' meters and keep the existing analogue meters for health reasons. Not all power companies advise their customers of this option. There are reports of bullying letters, false information and telephone calls claiming, incorrectly, that everyone has to have a wireless meter. Sandi has been in contact with most of the companies for over a year, checking their responses. Some people have had bad experiences from British Gas, e-on, npower and Scottish Power. For better companies contact the Helpline.

Keep Me Posted

This excellent campaign to keep the option of paper bank statements, utility bills, etc is well worth support. Some ES people find computers and mobile phones impossible to use safely.

Accountants needed

Please contact the charity's treasurer, Sarah Dacre, if you know of (i) an ACA/FCA Accountant to help with Gift Aid, (ii) an FCA Accountant used to the requirements of the Charities Commission regulations to compile the Annual return and post the year end figures for December 2013.

More letters

Many thanks to those who continue to write to MPs, MEPs, companies, schools, the NHS etc, to alert them to the challenges of ES. Trustees continue to write to the Secretary of State for Health, the Rt Hon. Jeremy Hunt, MP, and PHE's AGNIR. They have also made submissions to consultations by government departments like DECC and DCLG.

Talks by Prof Olle Johansson

Two talks were given by Prof Johansson called "Are WiFi and mobile phones harming your child?" in November at schools in the south-east. They were very well attended with hundreds at one.

Talk in Stroud on ill health from mobiles, WiFi etc.

In October Michael Bevington, chair of ES-UK trustees, gave a talk in Stroud to some 70 people concerned about the dangers of mobiles, cordless phones, smart meters, masts and WiFi. This was instead of Dr Andrew Tresidder who was unable to attend at the last moment. The Gloucestershire Citizen on 14th October reported that symptoms include fatigue, headaches, dizziness and sleep problems, according to Gabriel Millar, the organizer, who said a report by the European Environment Agency lamented governments' slow response to earlier warnings about microwave technology.

Stage 1 ES: warnings needed

People who are starting to experience stage 1 ES symptoms need to be warned of the dangers of developing full EHS, Sandi reminds us. Thus headaches while using a mobile, or changed sleep patterns with a WiFi router left on, or a dizzy spell after using an iPad or iPhone, or a fuzzy head near a wireless smart meter or powerline, should not be dismissed as the result of the stress of work or school or a new routine, but treated in their own right as symptoms of the body reaching EM overloading. All doctors agree that it is essential to reduce your EM exposure before your ES becomes worse or develops into EHS.



ES-UK: - The First Decade

The foundation of ES-UK: 2003/04

On 27th October 2003 the ES-UK formal Declaration of Trust document was completed. There were three Trustees at first: Dr Denis Henshaw, Professor of Human Radiation Effects at the Physics Department in the University of Bristol, Dr David Dowson M.B., Ch.B, a GP and now a specialist in idiopathic conditions, and Ms Jean Philips BA, technical consultant and author from Powerwatch. On 2nd April 2004 ElectroSensitivity-UK was registered as a charity, number 1103018, with twin aims of supporting people with ES and educating the general public.

Ten years on: some historical perspectives on ES awareness in the UK, by Jean Philips

10 years! I could hardly believe it when Michael asked me to write this piece about the tenth anniversary of ES-UK's existence. It seems in many ways that ES-UK has always been around, which strikes me as being an acknowledgement of its achievements. However, there was a time when the idea of ES-UK was only gestating in the minds of a few, although awareness of ES had been growing steadily for the previous 20+ years.

Electrical sensitivity to microwaves was first reviewed in western scientific literature by Charlotte Silverman of the USA's FDA in 1973-80. Alasdair Philips was a member of Electronics and Computing for Peace. He was asked to investigate the zapping of the women protestors at Greenham Common in the mid-1980s and found evidence of the American military using the women as targets for experimental non-lethal pulsed microwave weapon technology. This was later confirmed to Alasdair by a senior Home Office person at a meeting in 1997. The symptoms induced in the women were what we now know as classic ES ones: headaches, nausea, sleep problems, memory and concentration problems, irritability, menstrual problems, etc. This was the start of our awareness of the problem.

In 1988 Powerwatch was formed, run by Alasdair, whilst I assisted. In November 1989, Cyril Smith and Simon Best published the now classic

"Electromagnetic Man" and Simon launched his newsletter of the same name. In February 1990, Alasdair, along with Roger Coghill and Simon Best, had an issue of Electronics and Wireless World (EWW) dedicated to EMF and RF bio-effects, with the front cover title "Killing Fields". This resulted in national coverage with TV and radio appearances. Roger Coghill has been a key player in the public debates on EMF and RF effects throughout the past 30 years. In 1992 we had a further a front-cover issue of EWW with an article "Power Politics - Playing with Children's Lives".

We (Powerwatch) produced the first edition of 'Living with Electricity' in 1994 and included lots of information about adverse health effects from low-level exposure to EMFs and RF. This was also the year of the COST244 EHS meeting in Graz, Austria and the first Copenhagen meeting on EHS.

During the 1990s there was increasing coverage of EHS in the major national UK newspapers. We worked with the founders of FEB in Sweden on EHS issues and produced a regular newsletter. Powerwatch kept up UK pressure on the National Radiological Protection Board (NRPB), the Department of Health, the EC and the media during the 1990s and Alasdair gave annual warning talks at international industry conferences from 1996 to 2003. In 1998 Roger Coghill, supported by Alasdair Philips and Chris Busby, brought a court case to demand radiation warning labels for mobile phones. This made live international TV news, even though the final legal judgement went against us.

In 2003 Alasdair and I published the first edition of 'Electromagnetic Sensitivity - A Modern Illness'. At this time there was only one small ES support group that we knew of in the UK, "Circuit", run

by Ann Ermel who was herself highly ES. This was also the year that Eileen O'Connor was making national headlines, fighting a mobile phone mast in Wishaw near Sutton Coldfield. This included organising a large public meeting including speakers from the NRPB, the MTHR, Barry Trower and Alasdair. Also this year the NRPB ran a formal consultation on exposure to EMFs (0-300 GHz) and we applied considerable personal pressure on them to assess EHS.



Another example of the growing interest in ES was the meeting in September 2003 of 40 professionals, including academics and experts on migraines, sick buildings, VDU sickness, allergies and hypersensitivity, to discuss ES with the Electromagnetic Biocompatibility Association

continued to grow and thrive, a tribute to all the unpaid hours and effort that underlie the work that is done to support everybody who is made ill by the scourge of modern technology.

So how are the original messages being addressed?

1) "Please believe me when I say I am affected by EMFs." ES-UK starts from a position of being non-judgmental listeners.

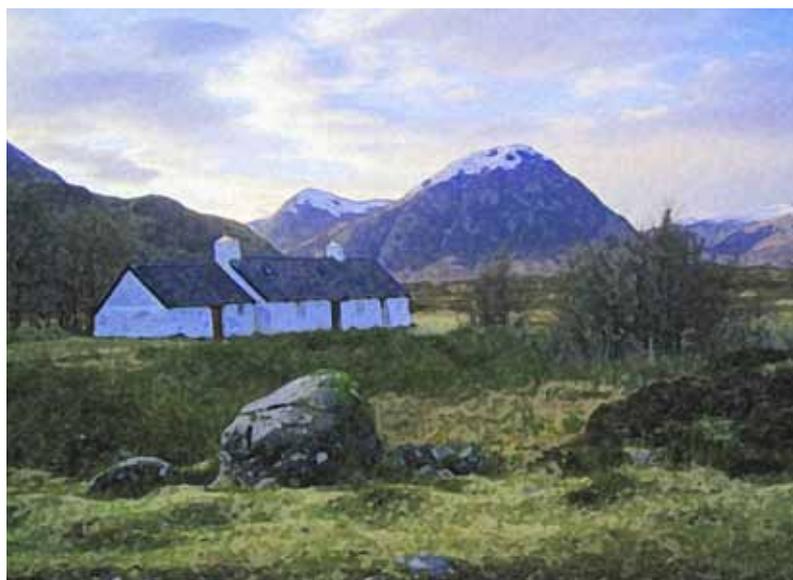
2) My family and friends don't support me." ES-UK provides information to give to people who are not affected by EMFs to understand the reality of those who are. The fantastic publication by Michael Bevington is a major source of information for those to whom the issue is new.

3) My GP thinks I'm mad and refers me to a psychiatrist." Unfortunately, this is still happening far too often. GP acceptance still seems to be difficult to win. A recent study of French GPs (J Lambrozo 2013, PMID: 23419463) said that they find their information from mainstream media rather than scientific and medical publications.

4) "I don't know what to do to feel better." The experience of many people with ES has resulted in an increasing number of ways in which people can help themselves by changing their lifestyle.

Here's to the next 10 years, when everyone will have heard of ES; has good information; there is legislation to support those with ES with regard to housing, work, leisure and transport; and that challenges will be different, but met with the same dedication as has kept ES-UK going for the last 10 years.

Jean Philips



Scotland's excellent "not-spots" under threat

In Scotland 27.5% of the country still enjoys no 2G mobile phone coverage, and even larger areas benefit from no 3G smartphone signals, according to a Scottish government report featured in Herald Scotland on 17th September. Sadly, these areas are under threat of 2B cancer agent radiation, after mobile companies lobbied for laxer planning rules. The best areas were Argyll & Bute with 39% without 2G and 71% without 3G, while in the Highlands 38% had no 2G and 70% no 3G, compared with Stirling with 29% and 47% respectively.

Chronic disease conference: ES "the most current epidemic"

The American Academy of Environmental Medicine on 24-27th October held an extraordinary conference led by Dr William Rea in Phoenix, Arizona, on chronic diseases, including EMF Hypersensitivity, "the most current epidemic to hit society".

Dr Rea: EHS "becoming the disaster of the 21st century"

Dr. William Rea, a cardiovascular surgeon in Dallas and a leading expert on EHS, who has treated EHS patients for 40 years, according to KFor.TV in Oklahoma City on 23rd July, said: "I think it's becoming the disaster of the 21st century." He says our cells are protected by membranes which are electromagnetic. They allow crucial materials like calcium, sodium and potassium to pass through. He believes the frequency from various devices, like smart meters, interrupts this process and causes health problems. Dr. Rea's centre excludes harmful radiation with aluminum blinds, porcelain floors, and glass shields over walls. In this way he can properly assess if patients are really hypersensitive or not.

Establishing a 'white zone' free of toxic radio waves: France 26-28th August

Dr Stephen McGill kindly supplied a translation about the meeting in France at Souvestrière, Drôme, France on 26-28th August. This was linked to plans for the creation of a white zone, "Une Terre Pour Les EHS", under President Philippe Tribaudeau, with MEP Michelle Rivasi, apparently the only such initiative in the world. This would create a White Zone for refuge and respite for EHS sufferers. This meeting brought together 58 people from all over France as well as from Germany, Spain and Norway. The EHS, along with their spouses or caregivers, stayed in local holiday accommodation, or pitched tent in adjacent fields, or slept in the camping vans that brought them there. Everyone could see the diversity of individual thresholds of sensitivity to the aggression of the ambient EM radiation, and the complexities of adapting tourist accommodation for the differing needs of individual ES. Philippe Tribaudeau, president of "A land for EHS", restated the founding principle of the association: the strict implementation of Resolution 1815 of the Council of Europe on 6th May 2011, "to pay particular attention to those with the syndrome of intolerance to EM fields and take special measures to protect them, such as creating "white areas" not covered by wireless networks."



Justine Arnaud, parliamentary assistant Michelle Rivasi MEP EELV (the French Ecological Party or Green Party), attended. Arnaud said that the feasibility study for the removal of artificial EMF radiation at the site was ongoing. They now need collective governance with different groups or associations.

Elisabeth Buil, vice-president of the association "A Land For EHS", and Bruno Besson talked about the campaign "Attention Ondes Toxiques" (Toxic Waves Warning) implemented by EELV French Ecological Party to educate elected officials on the problem of artificial EMFs. Catherine Neyrand, president of the POEM26 association, presented its information guide on the dangers of EM radiation, to be delivered to schools. Gilbert Leger, a physicist, pointed out the limitation that measuring appliances are too often "rather less sensitive than the EHS themselves." Stephen McGill believed that to create an officially sanctioned white zone in France would have an immense symbolic impact abroad. Bernadette Touloumond reported on her recent stay in hospital where they accepted her using a protective canopy in the hospital room and the medical team attempted to reduce the level of EMF to which she was exposed. A recurring theme in each workshop was how to treat ES effectively without escape from the cause - how to treat a burn still in flames. None of us have found a state of health comparable to that he or she had before the saturation of our environment by artificial EM radiation and no effective cure has been described.

Other attendees included: Mael Dieudonné, a doctoral student in sociology preparing a thesis on EHS, Alexander Pieroni completing a web-documentary on the EHS, Hamedine Kane, a documentary filmmaker starting a documentary on EHS, and Marc Khane, director of the documentary "Desperate

search for white zones" to be released in the autumn. ANSES, the French equivalent of the FDA, two months before the release of their 2013 'report' on ES, declined an invitation to attend. Audrey Garric wrote three articles in "Le Monde" on 31st August 2013:

www.lemonde.fr/planete/article/2013/08/30/ces-malades-des-ondes-electromagnetiques-qui-survivent_3468862_3244.html

www.lemonde.fr/planete/article/2013/08/30/les-electrohypersensibles-a-la-recherche-d-une-terre-vierge-de-toute-onde_3468950_3244.html

www.lemonde.fr/planete/article/2013/08/30/personnes-electrohypersensibles-ne-souffrance-mal-comprise-et-peu-prise-en-charge_3468951_3244.html

See also:

www.francebleu.fr/infos/ondes/tous-potentiellement-electrohypersensibles-792394
<http://uneterrepourlesehs.blogspot.fr>

Radio Blue Drôme- Ardèche devoted a special morning programme to the event, which was rebroadcast in part on France Info Sunday, 1st September.

Former Microsoft president: "EHS is real" – Seletun 2010 and BioInitiative 2012 replace WHO 2004

Frank Clegg, former president of Microsoft Canada and now CEO of Canadians for Safe Technology, on 12th August, in an article called "Electrohypersensitivity Is Real" in the Huffington Post Blog, pointed out the scientific errors in an article called "The Disease With No Name" on 3rd July by Michael Kruse, an activist in Canadian sceptic pressure-groups promoting WiFi and mobile phones, at least until IARC's carcinogen

classification in 2011. Kruse “failed to mention” the Seletun experts’ statement of 2010 which replaces the outdated WHO reports of 1996 and 2004, “that persons with electrohypersensitivity (EHS) symptoms be classified as functionally impaired.” He added that in March 2012, both the Austrian Medical Association and the European Council Parliamentary Assembly recognized EHS. The AMA promulgated treatment guidelines and the EC recommended that “particular attention” be paid to those with EHS. In addition, the Biolinitiative 2012 Report, by 29 international professionals from 10 countries, comprehensively reviewed 1,800 studies in the previous 5 years, “all somehow missed” by Kruse. The report concluded “a growing number of people worldwide have serious and debilitating symptoms that are key to various types of EMF and RFR exposure. Of this there is little doubt.”

Attitudes like Kruse’s, ignoring or hiding these findings, “makes it much more difficult” for doctors to understand, diagnose, and treat EHS. The Environmental Health Clinic at Toronto’s Women’s College Hospital, part of a joint research programme with the University of Toronto, is investigating EHS with highly respected physicians and researchers.

Clegg adds: “If there were not a problem, I would not be putting my own reputation as a technology business leader on the line I would not be telling everyone possible to minimize EMR exposure by keeping their devices away from their bodies to best protect their long-term health.”

EHS and chronic multi-system illness: “Burnout syndrome” (BOS)

In the chronic multisystem illness (CMI) known as “Burnout syndrome” (BOS), inflammation

results from nitrosative and oxidative stress (ROS) caused by exogenous stress, such as EM exposure from mobiles and WiFi. This leads to mitochondrial metabolic dysfunction, causing a lack of ATP (adenosine triphosphate) and subsequently diminished cellular performance. In the past, BOS was described as melancholia, vapors, neurasthenia, and depression (Ehrneburg, 2009). Now BOS belongs to the chronic disorders (Geuenich & Hagemann, 2012) of the so-called chronic multi-system illnesses (CMI) including: MCS (multiple chemical sensitivity), CFS (chronic fatigue syndrome), BOS (burnout syndrome), PTSD (post-traumatic stress disorder), Fibromyalgia syndrome. The prevalence of chronic multi-system illnesses is estimated to comprise at least 25% of the population in western industrial countries, with an increasing trend (Warnke U, Hensinger P, umwelt-medizin-gesellscha., 2013; trans. Gustavs K: “Increasing incidence of burnout due to magnetic and electromagnetic fields of cell phone networks and other wireless communication”.

www.mobilfunk-studien.org/assets/warnke_hensinger_umg_1_2013_engl_df.pdf

Restrict number and length of mobile calls.

Sleepiness from WiFi.

In a study of New Zealand early-adolescents’ subjective well-being, the number and duration of cellphone and cordless phone calls were associated with increased risk of headaches (>6 cellphone calls over 10 minutes weekly; >15 minutes cordless use daily).

Using a wired cellphone headset was associated with tinnitus, while wireless headsets were associated with headache, feeling down/



depressed, and waking in the night. Sleepiness was related to the 10 Hz alpha band of WiFi. “To safeguard young people’s well-being, we suggest limiting their use of cellphones and cordless phones to less than 15 minutes daily, and employing a speaker-phone device for longer daily use.

We recommend parental measures are taken to prevent young people being woken by their cellphones.” (Redmayne M et al, Environ Health, 2013).



Korea to label mobiles 1st or 2nd grade by health effects

According to the Korean Herald on 30th July the Ministry of Science, ICT and Future Planning announced that from August 2014, mobiles would give SAR heat-absorption ratings. Mobiles up to 0.8 W/kg will be 1st grade, and 0.8-1.6 2nd grade. Korea’s 1.6 W/kg limit is stricter than the 2.0 of some other countries and higher SAR mobiles cannot be sold there and will be labelled 3rd and 4th grade “caution” and “warning”.

“French safety watchdog recommends limiting exposure to radiofrequencies for children and intensive users”

This was the heading in the Daily Telegraph on 15th October about a report by 16 experts based on 300 studies since 2009 by ANSES, the French National Agency for Health, Food and Environmental Safety. There was some evidence for brain cancer from intensive use of 40 minutes talking per day. They also listed possible effects such as disruption to sleep, male fertility and cognitive performance.

India: warnings for mobiles; possible ban on masts near schools

The Department of Telecom in India will require all new mobiles to be sold with a booklet warning of the radiation dangers, according to Mumbai Mirror on 5th June. The Department will also consider banning masts near schools.



30% increase in radiation stress in 10 years; 46% chronic illness from EM exposure

Martin Möhrke, the Europe Resource Coordinator of the Foundation for Alternative and Integrative Medicine wrote in "4G/LTE Mobile Internet and WiFi: The largest pandemic ever?!" of his experiences in Holland: "in the clinic we see more and more patients in whom radiation overload is detected." Radiation stress affected about 3% of patients in 2002 but 33% by 2012. Of 300 patients with chronic complaints, for 46% the major cause was radiation.

Science heroes challenging governments and industry

The Prove-It website in August listed 18 scientific heroes who have researched bio-electrical effects, often suffering personally when challenging governments and businesses over the safety of wireless. They are: Dr Ross Adey (1922-2004), Dr Robert Becker (1923-2008), Dr Carl Blackman, Dr Martin Blank, Dr David Carpenter, Dr Neil Cherry (1946-2002), Alvaro de Salles, Prof. Yuri Grigoriev, Prof. Lennart Hardell, Dr Magda Havas, Dr Olle Johansson, Dr Michael Kundi, Dr Henry Lai, Dr Andrew Marino, Dr Kjell Hansson Mild, Dr Samuel Milham, Dr Lloyd Morgan, Dr Jerry Phillips.

Field intensity, not SAR, for biological effects

Since SAR refers to thermal effects, but most recorded biological effects of environmental radiation are non-thermal, SAR should not be used as the primary dosimetric quantity. Instead the primary measure for EMF exposures should be radiation/field intensity (Panagopoulos DJ et al, PLoS One, 2013).

ANSES to study EHS

On 15th October ANSES, the French Agency for Food, Environmental and Occupational Health & Safety, published a press update on "RF and Health" warning children and other vulnerable groups to reduce their EM exposure in the light of growing evidence of harm. They delayed a statement on EHS because they wish to study this further. "It will also be further developing its work on ES individuals, specifically by examining all the available French and international data on this topic that merits closer attention" (p.2.) Biological effects "can affect sleep, male fertility or cognitive performance" (p.2). "Considering the number of recent publications and the expected publication of results from studies currently underway, and the need to grant particular attention to the issue of hypersensitivity to electromagnetic waves which has been widely discussed, ANSES decided that the subject would be dealt with in a special report from the expert Working Group on Radiofrequencies and health, on which work will start before the end of this year [2013]" (p.5). "A call for research projects was launched in late 2013 on the subjects which have been insufficiently handled in the current projects, such as EHS." (p.17).

"The next 'casualty catastrophe' after tobacco and asbestos"

See the 8 minute video: <http://rt.com/shows/the-truthseeker/manufacturers-cell-phone-warning-447/>

EHS from Bluetooth: "a ticking time bomb" "bigger than lead and asbestos together"

A comment posted on the Daily Telegraph article of 15th October: "I developed EHS from using a mobile phone hands free (Bluetooth) for about 4 hours every day for 2 years. Trust me this is going to be bigger than the lead in petrol and asbestos in buildings put together. It's a ticking time bomb."

Comcare does not provide guidance on IEI-EMF or EHS

A Comcare spokesperson declined to answer any questions specifically about the Australian case in 2013 granting compensation to a scientist who suffered EHS, but confirmed the agency did not have official guidance on how to treat future compensation claims lodged on the basis of IEI-EMF, according to iNews on 10th September. A spokesperson said: "Comcare's claims policy and procedure manual does not provide guidance about IEI-EMF or EHS." An employee wishing to make a claim must serve a notice of injury on their employer and complete a claim form. The form must be "accompanied by a medical certificate from a legally qualified medical practitioner certifying that the employee has sustained an injury or suffers from a disease, its relationship to employment, and the fact that the claimed condition has resulted in medical treatment and/or incapacity for work."



President of AAEM on EM bio-effects: "Avoidance is truly the key"

Dr Amy Dean, an expert on EM bio-effects and president of the American Academy of Environmental Medicine, was reported by Oakland News on 17th October as saying: "Much peer-reviewed research has been published that proves EMF and RF emissions are linked to genetic defects, cancer, developmental abnormalities, neurological and cardiac disease, as well as other diseases. ... Based on this research [a 92-case series], it appears that there is a direct correlation between smart meter installation and the development of health conditions such as insomnia, fatigue, headaches, cognitive disturbance and other symptoms. Many of these are the same symptoms correlated with EMF and RF exposure found in the scientific literature. It was clear to me when reviewing the scientific literature that these fields have a definite impact on the human body and can cause disease." Patients began reporting that they developed symptoms after smart meters were installed on their homes. They report fatigue, chest pain, headaches, heartbeat irregularities, pain and other debilitating symptoms. For example, one of my patients developed palpitations and a heart arrhythmia following the installation of three smart meters on her condo. After two of the three meters were removed, her heart condition improved significantly. There are many patients like this in Michigan and throughout North America. There is clearly some type of physiological process occurring. EMF and RF field measurements will often confirm that patients' symptoms are indeed real," Dean said.



"Environmental pollutants, including EMF and RF, generally impact the weakest link in the body. So, if a person is prone to heart disease, cancer or neurological disease, the EMF/RF exposure will likely result in symptoms related to that vulnerable system. Clinical observations of environmental physicians are also showing that exposure to certain pollutants in the past or present can make an individual more susceptible to EHS," Dean said.

"Avoidance of exposure is truly the key. At a minimum, people should have the RF wireless component of their smart meter turned off. However, patients are reporting that the digital meter with wireless component switched off also provokes symptoms," Dean said. "Having the option to maintain an analog meter on the home or workplace is critical to protect patients' health."

MCS-Aware survey

MCS-Aware is a charity for Multiple Chemical Sensitivity offering support and information to anyone affected by multiple sensitivities and environmental illness. It is conducting a survey, only for people in the UK, to present to housing officials to improve services and accommodation for people with environmental illness: www.surveymonkey.com/s/MCS_Aware_Housing_Survey Paper copies and further information are available from: MCS-Aware, 56 Gaping Lane, Hitchin, Herts. SG5 2JE, and www.MCS-Aware.org

Power lines give cyclists twinges: EMF "another toxin like mercury or lead"

Cyclists on the Bluebonnet Trail in Plano, in North Texas, between Ohio Drive and Coit Road, report suddenly feeling the hair standing up on the back of their necks and twinges through their arms and legs where the path meanders through the power lines, according to WFAA News on 6th September. Paul Potter, a cyclist, said the electrical or tingling sensation in the legs occurs where the lines cross the pathway. Andrew Brown, who also rides the Bluebonnet several times a week, says that at certain spots along the trail: "You feel a little sensation and a tinge, and I feel it mostly in my arm." Dr Janet Kirby, a radiologist, said that, based on the studies she researched, radiation from EMFs can indeed cause health problems. She suggests riders find another trail: "EMF is actually another toxin, like mercury or lead." Oncor officials say the EMFs are larger in the hot summer months, when more power is running through the lines for air-conditioning. Plano Parks and Recreation officials say they looked at studies 20 years ago when they decided to locate the trails under the power lines.



4G "making me sick"

From an internet post about 4G on 30th September: "Just got it yesterday and every time I turn it on it's making me sick. I feel like I need to throw up. This didn't happen with the 3G."

ES AND WIFI HARM

WiFi Thalidomide:

Barrie Trower's challenge over no safe level

A new paper by Barrie Trower, "WiFi – A Thalidomide in the Making. Who Cares?" published on 1st September, includes his challenge for any scientist from industry or government to answer one question: "What is the safe level of microwave irradiation for the ovarian follicles during the first 100 days development of the embryo?" If ever someone should be prepared to give an answer he then says the research evidence should be sent to a leading scientific journal for independent peer review. So far no one has taken up his challenge. Anyone can ask any school principal or governor the same question.



Ban WiFi in schools – eminent scientist

Eminent Swedish neuroscientist Olle Johansson, of the Department of Neuroscience at the Karolinska Institute, Stockholm, said Wi-Fi should be banned in schools, according to News.com on 29th September. He told News Corp Australia newspapers: "These wireless systems are never off, and the exposure is not voluntary. Exposures should be reduced now rather than waiting for proof of harm before acting."

Professor and regulator: "Don't deploy WiFi until you're sure it's safe"

Emeritus Professor Ian Lowe, president of the Australian Conservation Foundation and a member of the Australian Radiation Protection & Nuclear Safety Agency (ARPANSA)'s Radiation Health and Safety Advisory Council, said he would ask the council to investigate WiFi and mobile phone emission standards for children, according to News.com on 29th September. He told News Corp Australia papers: "When children's health is concerned it's always sensible to err on the side of caution. You should not deploy technology, be it WiFi in schools or diagnostic technologies, until you can be sure it is safe and cost-effective."

Neglecting hazards of irradiating children with WiFi "a crime against humanity"

Markov & Grigoriev ("Wi-Fi technology – an uncontrolled global experiment on the health of mankind", Electromagn Biol Med., 2013) note that the "brains of 7,000,000,000 people are exposed to unknown spectrum of EMF; there are no criteria for hazard, no monitoring, no research and no prevention." They point out that tissue damage in the brain may be completely unnoticed, since pain is felt at 45^o C which is also the threshold for irreversible skin damage while internal heating of brain tissue would not be sensed as a burning sensation or probably at all. In 2001 Markov at a WHO meeting said that neglecting the hazard of high frequency EMF for children is a crime against humanity.

There are two different approaches. Although in 2011 IARC stated RF is a 2B carcinogen, at the same time ICNIRP claimed that "the trend in the accumulating evidence is against the hypothesis that mobile phones can cause brain tumors in adults" (Boice & Tarone, 2011), leading to the question: "Why ICNIRP takes this position?" There are two reasons: (1) most of the funding for ICNIRP comes from industry and (2) most members of ICNIRP are engineers for whom only thermal effects cause biological effects. In 2003 IEEE published a standard that affirmed that biological effects can only be thermal (Cho & D'Andrea). "This policy serves very well in the industry" but is a "serious barrier preventing biology-based assessment of human health".

"The continuous noncontrolled exposure of the entire civilization to low-intensity EMFs represents now more serious problem for the mankind than ionizing radiation where the sources of radiation are under strict control and are well localized." For the first time in the history of mankind "children are exposed to harmful nonionizing radiation and potentially are subject of larger risk than adults", since the same dose for an adult has greater effects on a child's brain.



Canada forces ES children out of school

Three young children diagnosed by their doctors with EHS have been forced to leave their WiFi-irradiated schools and now have no access to schools in the Sooke School District. The parents are appealing to the British Columbia Ministry of Education to redress this discrimination and a legal fund has been established to help pay the costs (Parents for Safe Schools, EHS Kids – legal fund).

Lecturer forced from job by WiFi ill health

Dr James McCaughan, a Sydney University physics lecturer, quit his job in July after WiFi exposure from smart phones in the lecture room “shut me down”, according to News.com of Australia on 29th September. WiFi on trains gave him a ringing in the ears. “Different people react in different ways,” he said. “It’s like when people go out in the sun, the fair skins come up with sunburn far more quickly than people with olive skin. Once you’ve been stimulated with EMF radiation it doesn’t stop when you turn it off — your head is still ringing.” Dr McCaughan is building a “Faraday cage” around his home computer to shield him from EM exposure.

Head teacher forced from job by WiFi ill health

Dr Marie-Therese Gibson, the principal for 19 years of the Tangara School for Girls at Cherrybrook, an exclusive Sydney girls’ school, resigned in July due to health problems from WiFi installed three years ago, according to News.com of Australia on 29th September. The school agreed to switch off the WiFi in the administrative wing, but Dr Gibson suffered debilitating headaches when she visited other parts of the school. “I gave the best part of my life to that school but I had to resign because I couldn’t exist in that environment,” she said. “I realised as time went on I was getting sicker and sicker and couldn’t sleep at night. There were parts of the school I just couldn’t go into. I started getting strange headaches and tremendous fatigue, and I found I couldn’t think clearly. My thyroid is kaput and my body can’t make melatonin.” Dr Gibson said she believed schools should cable computers, or install switches to shut down WiFi when not in use: “Why should students be immersed in it for six or seven hours a day when they’re using it for one? It just doesn’t make sense to me.”

Teacher forced from job by WiFi ill health

Maureen Kirsch, a Melbourne teacher with 30 years’ experience, quit supply teaching in 2011 because WiFi was giving her blinding headaches, according to Australia’s Herald Sun on 29th September. “There were schools I’d been going to for 10 or 15 years

and never had a problem, then I started having problems with their Wi-Fi,” she said yesterday. “I’d noticed that 17 laptops would go on and I couldn’t stand in the classroom. I felt like my head was going to explode, I

came home with blurred vision and I couldn’t think straight. It happened continually and repeatedly until I was so ill I gave up.” Ms Kirsch said she first suffered symptoms when an electricity smart meter was installed in her home, and she has since moved house.

ES mother withdraws sons from WiFi school

Ms Louise Brosnan, a chartered accountant and former partner of PricewaterhouseCoopers, removed her sons John, 10, and Peter, 9, from St Kevin’s Primary School, Geebung, Brisbane, after it installed WiFi this year and told her it could not comply with her request that her sons use only hardwired computers and be kept away from wireless devices, according to News.com of Australia on 29th September. Ms Brosnan suffered “terrible headaches, vomiting and nausea” when exposed to WiFi and did not want her children using it. She said: “I’m disappointed they didn’t try to accommodate our request, not only for my own children but for all the children and staff.” The boys now attend a Catholic school at Park Ridge, a 45-minute drive from their New Farm home, which does not use WiFi. John Phelan, Brisbane Catholic Education spokesman, said schools were not obliged to use WiFi but it was used in all new schools.



Australian scientist with ES wins ill health compensation

“CSIRO scientist Dr David McDonald wins compensation for WiFi pain” was the title of an article in Australia’s Herald Sun on 29th September. His compensation, reported in the July 2013 Newsletter, was “for crippling headaches, nausea and dizziness caused by using WiFi and computers at work”. He has now moved to the Victorian countryside to avoid EM radiation; he wears protective clothing, has screened his house with metal shields and in hotels sleeps in a special tent to screen against WiFi. He said “When I go into a building with WiFi I feel extremely ill. I get a very strong headache and the left hand side of my head feels numb. After ceasing that exposure, the symptoms disappear.” The case could set a precedent for other workers’ compensation cases for “aggravation of a condition of nausea, disorientation and headaches.” Dr McDonald had told the selection panel at his job interview that he suffered from sensitivity to EM frequencies from computers, TVs, mobile phones, microwave ovens, power lines and transformers. The CSIRO agreed to give him an assistant so he could avoid using a computer but in 2005 withdrew this support and ordered Dr McDonald to trial working with a mobile phone and shielded computer, but “Dr McDonald became ill within minutes each time his computer was switched on,” according to the tribunal judgement. “He experienced nausea and headaches and suffered severe migraine 2-12 hours later. He felt unwell for several days after each attack.”

Canadian school switches off WiFi: health dangers for children and pregnant women

At Winlaw in Canada parents successfully lobbied the Kootenay Lake School District board meeting on 16th April to have WiFi turned off in their local elementary school because of the health dangers, according to the Nelson Star on 9th May. Clare Kelly told 103.5 the Bridge: “There are no long-term health studies that have been conducted on the effects of wireless frequencies on children or on pregnant women.” At that board meeting, superintendent Jeff Jones said: “It was easy for us to say ‘we can turn it off’. It didn’t seem to make sense to force the issue.” Teachers and administration staff at the Winlaw school were not using wireless technology so after making some adjustments to existing electrical arrangements, the WiFi will be turned off. In 2011 Saanich School District 63 banned WiFi in elementary schools. [In 2013 the French parliament advised against WiFi in schools and Israel banned or limited WiFi in primary schools. – Ed.]

Google’s “loony” balloons with 2B cancer radiation for all

Google is trialing WiFi access in New Zealand from 30 helium balloons 15m across, carried by winds around the globe at a height of 20 km, according to 3News on 15th June 2013. They have a 22-lb payload for solar-powered panels which can transmit for a day after 4 hours’ charging using a battery about 10 times the size of a laptop’s. Base stations, 60 miles apart, form a network. A receiver in a 1-foot diameter sphere on a house gives 3G internet speeds. Critics say “Project Loon” will cover everyone with 2B cancer radiation.

Israel limits WiFi in schools: ban below 1st grade, grades 2-3 limited time

Israel’s Ministry of Education has issued a new set of guidelines with effect from August 2013, according to the wireless trade association, GSMA, on 22nd August.

- Prior to the first grade, WiFi will not be installed in classrooms.
- In the first grade, students will have their WiFi use limited to study for one hour per day and no more than 3 days per week.
- In the second and third grades, students will have their WiFi use limited to 2 hours per day for no more than 4 days per week. [Grades 1-6 are for ages 6-12.]
- Teachers will be required to turn off all radio-frequency emitting devices, such as mobile phones and WiFi routers, when they are not in use for educational purposes.
- Desktop computers and power supplies will be kept at least 20 cm from students.
- All WiFi equipment will be tested for compliance with safety limits before and after installation in Israeli schools.

iPads cause headaches

Dr James LeFanu raised the problem of iPads being the “hidden cause of severe and recurrent headaches” on 16th June 2013 in the Daily Telegraph. A reader reported that these lasted up to 36 hours after using one, but would recur promptly when she picked the iPad up again.



READERS' COMMENTS

May 2013 (i) black-out

Lillian writes: "I have a particular interest in this subject [widespread symptoms in May 2013, reported in the July 2013 Newsletter], as, at 12.30am on 14th May, I fainted without warning, something I have never done before. I had just filled the kettle to make a bedtime drink and, moments later, woke up on the kitchen floor with my head soaked in cold water. Suspecting an abnormal heart rhythm, the doctor has referred me to a cardiologist, but I wonder whether there could be a link with the ES symptoms reported and whether holding a stainless steel kettle made me more vulnerable to EM radiation. Did any other readers have similar black-outs around that time and can anyone suggest a specific explanation? If there was a military or police exercise, can we find out anything by using the Freedom of Information Act?"

May 2013 (ii) worsened symptoms: "rather like having ADHD"

A reader writes: "I was very interested to read about the nasty symptoms suffered by your readers in mid May. I was also one of them. I had very severe pain above both eyes and pressure behind the eyeballs. I felt slightly nauseous, was unable to sleep, typically 'tired but wired'. It was rather like having ADHD. Do we have any explanation? Something 'switched off' mid morning on Friday 17th May, which was a great relief. I slid onto the floor and slept there for four hours."

May 2013 (iii) landline telephone?

This reader adds that her Acoustimeter, which could pick up 4G testing, did not record any increase in signal strengths over this period, and the further she walked from her house the better she felt, and she felt great a couple of hundred yards from the house, even though all the house electrics had been switched off at the mains. Her final conclusion was that the problem, whatever it was, was entering her house via the telephone wire and then continuing through the wires to the extensions.

May 2013 (iv) and subsequently: very damaging 3D Holistic radar?

Sandi suggests that some of the technology was testing of 3D Holistic radar, since the RAF military signal appeared in July/August, while 4G was out before then, and the EE Broadband started in 12 towns on 4th July. The 3D Holistic radar is reckoned to be very damaging indeed. See the separate section on radar.

Mast removed = symptoms removed

A reader reports how a the removal of a single phone mast made a considerable difference to the health of those living nearby: "The victims had suffered ill effects for almost 12 years since activation of the first mast - and had 7 hours sleep the night after the mast was deactivated - for only the second time since its activation! The first time when it was off for the whole of April 2002, and they were all ill again immediately it was reactivated."

Beware of new car keys: keep your distance!

Beverly reports that, although she has been electro- and chemically sensitive for 30+ years, only in the last few years did she realise that it had a name and that other people suffered too. "We recently changed our car to a more recent model and I was surprised to find that the car keys, which are radio controls, had such a bad effect on me. I immediately get 'zapped' as soon as they come into the house even if they are in a pocket. We now have to keep them in the shed, joining other gadgets that my partner has. Of course there is the usual 'sigh' and eye-rolling from my partner, but that's usual, I suppose. So please, everyone, be aware of this problem which may not have occurred to you."

WiFi and mobiles cause confusion and memory loss

A correspondent reports that confusion and memory loss caused by mobile phone and WiFi use was quickly and amazingly corrected once he stopped using both.

WiFi buses cause health problems

A correspondent reports that three days in Edinburgh on WiFi-enabled buses sitting next to people with activated smart phones provided a terrible cold/chest with heating and thirst, but not the usual headaches or skin burning. Perhaps this was the different range of frequencies from usual.

Delayed effects: any way of predicting?

A reader asks whether anyone knows a way of predicting delayed effects from exposure to WiFi and similar radiation. He says it is annoying to be laid flat (literally) with radiation sickness some 12 to 18 hours after the original incident which caused it; it can ruin plans for the following day and is potentially dangerous.

FILMS, BOOKS AND WEBSITES

“The Ghost at our Table”: WiFi like passive smoking and “best removed”

In his film “Resonance: Beings of Frequency” director James Russell unveils “a taboo subject of our age: the rage for ‘mobile’ products, fuelled by marketing, is creating an EM environment that may be alien to our biology,” according to Lynne Wycherley in the September online edition of Resurgence & Ecologist. “No green vision is complete without confronting this exponential change. It is the ghost at our table: busy with microwave gadgets, we do not hear the voices of warning scientists.” Geneticist Mae-Wan Ho compares WiFi exposure to passive smoking: a toxin best removed from public spaces.

“Take Back Your Power”: unable to sleep in bedroom because of smart meters

The “eye-opening” and “influential” documentary by Josh del Sol, released on 5th September, about the health and privacy dangers of wireless smart meters is gaining good reviews. The Blaze on 17th September notes that Josh del Sol remembers when smart meters were being installed a couple years ago in British Columbia. Within a day of a meter being installed at a friend’s home, del Sol said she started experiencing symptoms: “Rashes, nausea.” del Sol said: “I thought, I’ve got to find out what is going on.” The more he looked into controversial smart meters, the more he realized he had enough content for a full-fledged documentary. The 102 minutes film includes an elderly woman who suffered nose bleeds and could no longer sleep in her bedroom after a “smart meter bank”, a block of several smart meters, was installed on the outside wall. “We want to change how the energy corporations are working with their customers and instill a practice of transparency, accountability and fairness,” said del Sol, according to Citizen Review Online on 13th August.

Mobile phone cancer report wins award

The KTVU News report by Sharon Navratil and John Fowler on women, like Tiffany aged 21 with no genetic or risk factor, getting breast cancer from mobile phones kept in their bras, won a Northern California Emmy Award in the Special Assignment category in June 2013.

Novel about ES

A novel in French by Jean-Yves Cendrey was published on 28th September by Actes Sud: “Schproum, aborted novel and story of my illness”, reflecting the downward spiral of the author suffering from EHS (ISBN 978-2-330-02784-1). It featured on the show



“Mood Vagabond” by France Inter on 14th October. For the last six years Cendrey has lived in Berlin with his wife Marie N’Diaye, according to France Info. He began the first 60 pages in January 2013 as a novel set in Berlin. But then he could go no further when he started to have excruciating headaches, insomnia, pain in the leg, burning on the neck, dizziness and aphasia. He then switched to writing a book about this phenomenon. After months of health problems, he finally realized that he had become EHS, or allergic to EM waves as from mobile phones and relay antenna. Forced to change homes, he moved into a house with thick walls for protection. He recognises that some humans can support a large amount of EM exposure but explains that he has reached his threshold.

“How to be an EMF Superhero!”

This EMF Analysis page has useful information: www.emfanalysis.com/emf-superhero.html

RADAR ILL HEALTH AND NON-THERMAL EM WARFARE

4 Hz 3D holographic radar: health concerns

Aveillant announced 'successful' tests at Glasgow Prestwick airport of its 3D holographic radar, designed to cope with disturbance from wind turbine blades, according to the Scotsman on 13th July. Its Cambridge tests hope for accuracy to 20 nautical miles, while normal radar covers 30nm. Traditional radar scans on a rotating antenna every 4 seconds (0.25 Hz), but 3D radar maintains effectively constant 360-degree 3D surveillance by going round 4 times per second (4 Hz). There are anecdotal reports of significant health effects from 3D radar, but so far there do not appear to be any safety studies on the health of sensitive people.

3D radar: health surveys?

Artisan 3D radar, which is "capable of cutting through interference equal to 10,000 mobile phone signals", is being tested by BAE at Somerton Aerodrome, Cowes, Isle of Wight, prior to installation in the Royal Navy's new Queen Elizabeth class aircraft carriers in 2017, according to Ottawa News on 10th September. It can track more than 900 targets at one time as small as a tennis ball travelling at 3 times the speed of sound, and at a distance of up to 200 km. There are no reports of health surveys of people living in range of the testing facility.

WHO muddled on non-thermal effects from radar: "not sufficiently established" but "avoid where possible"

"There are also a number of studies that report non-thermal effects, where no appreciable rise in temperature can be measured." "Exposure to very intense pulsed RF fields, similar to those used by radar systems, has been reported to suppress the startle response and evoke body movements in conscious mice. In addition, people with normal hearing have perceived pulse RF fields with frequencies between about 200 MHz and 6.5 GHz. This is called the microwave hearing effect. The sound has been variously described as a buzzing, clicking, hissing or popping sound, depending on the RF pulsing characteristics. Prolonged or repeated exposure may be stressful and should be avoided where possible." "Exposure to RF levels too low to involve heating, (i.e., very low SARs), has been reported by several groups to alter calcium ion mobility, which is responsible for transmitting information in tissue cells. However, these effects are not sufficiently established to provide a basis for restricting human exposure." WHO fact sheet no. 226 (radar).

Radar workers suffer

Of 100 workers occupationally exposed to radar at 14-18 GHz, 20-39% reported feeling run down, headache, tightness or pressure in the head, insomnia, anxiety, and bad-tempered. 47% also reported feeling under strain and 31% responded less than usual, regarding reaction time and short-term memory indices (Dehghan N, Taeb S, Indian J Occup Environ Med. 2013).



Radar village: record numbers of tumours, strokes, congenital heart diseases

On 30th April 2013 a conference on "Radar, Radiofrequency and Health Risks" was held at Potenza Picena, Italy, with 20 international speakers, none from the UK. Radar from an air force base to the east was linked with unusual levels of ill health in the hill-top village. A report by ARPAM in February 2013 said radiation was under ICNIRP's heating levels, but it did not apparently investigate known non-thermal effects. There were concerns about "a record number of tumours, stroke, heart attack, ischemia, seizures without a fever, and the birth of children with congenital heart diseases, with an incidence tens of times higher than the national average," according to L'Indiscreto on 5th November 2012.

Non-thermal EM warfare

The range of EM warfare at non-thermal levels is expanding. Russian scientists are developing psychotronic guns which disturb the central nervous system and alter brain function, according to Tested in September. There is already a range of sound and light guns which debilitate people by disturbing their senses. Medusa, developed by WaveBand in California since 2004, uses microwaves to produce microwave hearing, the microwave auditory effect of Frey effect, where the ear hears painful white noise or audible speech, according to New Scientist on 3rd July 2008, where it was called a "microwave ray gun". Dr James Lin of the University of Illinois said: "You might see neural damage." NATO's Science & Technology Organisation SCI-250 under Dr Ernst Krograger is developing an EM pulsed beam in Norway to disable the electronics in vehicles and even jet-skis at a relatively short range, as is the UK Ministry of Defence's Defence, Science & Technology Laboratory, according to the Daily Telegraph on 12th September.

MERCURY'S TOXIC DANGERS AND EM EXPOSURE

Mercury and EM exposure

Mercury, the most toxic heavy metal, has long been a concern to people with ES. Amalgam fillings can react painfully when exposed to both ELF and radio frequency or microwave pollution, such as WiFi. The year 2013 sees the long-awaited start of an international reduction in mercury levels.

Causes of high mercury levels in the body: amalgam fillings, fish and mobile phones

(a) Mercury levels in the body typically relate to amalgam dental fillings and fish consumption (Barghi M et al., Biol Trace Elem Res. 2012).

(b) It is known that mercury can be released from dental amalgam fillings by mobile phone radiation and magnetic fields from magnetic resonance imaging (MRI) scans (Mortazavi SM et al., Pak J Biol Sci. 2008; Shahidi SH et al., Dentomaxillofac Radiol., 2009).

(c) People with ES and MS can benefit from the biological removal of amalgam fillings by holistic dentists. See Dr Cox's article in ES-UK News (11.3) of September 2013.

Amount of mercury for toxicity: peak value, not time?

Although mercury accumulates as a poison in body tissue, it has been argued that its toxicity depends on peak value, not on length of exposure (Clarkson TW, Magos L, Crit Rev Toxicol., 2006).

Short-term effects of mercury poisoning: acute symptoms

Symptoms of mercury poisoning include, according to "Toxicological Profile for Mercury", US Agency for Toxic Substances and Disease Registry, 1999, p.13: "personality changes (irritability, shyness, nervousness), tremors, changes in vision (constriction (or narrowing) of the visual field), deafness, muscle incoordination, loss of sensation, and difficulties with memory." "The kidneys are also sensitive to the effects of mercury, because mercury accumulates in the kidneys." "Short-term exposure (hours) to high levels of metallic mercury vapor in the air can damage the lining of the mouth and irritate the lungs and airways, causing tightness of the breath, a burning sensation in the lungs, and coughing. Other effects from exposure to mercury vapor include nausea, vomiting, diarrhea, increases in blood pressure or heart rate, skin rashes, and eye irritation. Damage to the lining of the mouth and lungs can also occur from exposure to lower levels of mercury vapor over longer periods."

Long-term effects of mercury poisoning: cancer and neurological illnesses

Mercury from amalgam fillings is linked with cancer and many neurological illnesses. The US 2001 National Health and Nutrition Examination Survey of 31,000 adults (NHANES III) found that the number of dental fillings, mostly amalgam, was correlated with incidence of cancer, thyroid conditions, mental conditions, nervous system diseases including MS, respiratory and genito-urinary diseases, and eye, circulatory and respiratory disorders. A 2005 review by the Frieberg University Institute for Environmental Medicine found that "mercury

from dental amalgam may lead to nephrotoxicity, neurobehavioural changes, automimmunity, oxidative stress, autism, skin and mucosa alterations or non-specific symptoms and complaints", that it was linked to Alzheimer's disease and MS, and that its removal permanently improves various chronic complaints. (Mutter J et al, Gesundheitswesen, 2005). In contrast, the pro-industry minority group SCENIHR in 2008 concluded "there is no scientific evidence for risks of adverse systemic effects exist and the current use of dental amalgam does not pose a risk of systemic disease," but this conclusion was severely criticised (Mutter J, J Occup Med Toxicol. 2011).

Mercury and demyelination

Mercury inhibits the formation of myelin, which protects nerves. This can occur in prenatal mercury exposure from the mother. Demyelination is associated with ES and MS. MS improves with chelation of mercury and other heavy metals, suggesting that demyelination can be related to mercury poisoning (Fulgenzi A et al, Biometals, 2012). Tremor from mercury intoxication and MS suggest similarities in axonal demyelination (Goetz CG, Neurology, 2010).



Mercury, EM exposure, Alzheimer's and autism

The link between magnetic fields and mercury effects could explain the following.

- (i) mercury levels are often increased in Alzheimer's patients;
- (ii) Alzheimer's is associated with proximity to power lines and their magnetic fields;
- (iii) autism can be related to both high mercury levels and EM exposure;
- (iv) magnetic fields can directly influence neuropathological conditions;
- (v) the removal of amalgam fillings typically improves general health.

(Mutter J et al, J Alzheimers Dis., 2010; Huss A et al, Am J Epidemiol., 2009; Mutter J et al, Neuro Endocrinol Lett., 2005; Geier DA et al, Int J Environ Res Public Health, 2012; Thornton IM, Med Hypotheses, 2006; Carlo GL, Mariea TJ, J Australas Coll Nutritional & Envir Med., 2007; Bersani FS et al, Eur Psychiatry, 2013; Lygre GB et al, Acta Odontol Scand., 2013).

Prenatal mercury exposure and ADHD

Low-level prenatal mercury exposure is associated with greater risk of ADHD. Fish consumption may cause or protect against this. (Sagiv SK et al, Arch Pediatr Adolesc Med., 2012). Prenatal effects were found in the Faroe Islands study, but not the Seychelles Islands study, although there was no consideration of natural chelation or differences in EM exposure, which might be greater in colder regions like the Faroe Islands (Bellinger DC, Saf Health Work., 2013).

Maternal mercury levels and IQ

There is a dose-response relationship between levels of mercury in maternal hair and the IQ of the child (Axelrad DA et al, Environ. Health Perspect., 2007).

Negative probiotics may help chelate positive mercury

Methylmercury is a positively charged ion often formed from mercury by certain bacteria. It accumulates in organisms and can thus biomagnify up the food chain, especially in some fish. Probiotics may help the development of lactobacillus in the mouth and gut. This is a bacteria with a large net negative charge, which helps bind and detoxify heavy metals with positive charges like lead, cadmium and possibly mercury (Monachese M et al, Appl Environ Microbiol., 2012).

Mercury half-life

The half-life of mercury in blood and hair samples from fish consumption is often given as 3 months (Yaginuma-Sakurai K et al, J Toxicol Sci., 2012).

Manmade mercury four times environmental mercury

Mercury is released into the atmosphere by volcanoes and erosion. It stays in the atmosphere for up to a year before being buried in surface sediment. Annual production of mercury from human activities like burning fossil fuels and mining is estimated as about 4 x natural geogenic emissions.

It will take about 2,000 years for all current accumulated anthropogenic mercury to return to sediments. In 2007 fish provided 16% of global intake of animal protein and 6% of all protein consumed. The widespread contamination of fish by methylmercury is therefore "a threat to human health in a global scale". Rice grown in southeastern China also has high atmospheric mercury. (Driscoll CT et al, Environ Sci Technol., 2013; Streets DG et al, Environ Sci Technol., 2011).

Mercury toxicity known since 1810

An early instance of mercury poisoning occurred in 1810, when the crews of HMS Triumph and HMS Phipps experienced skin problems, tooth loss, tremor, paralysis, pulmonary complaints and salivation after elemental mercury captured from a Spanish ship near Cadiz spilled in the ships' holds. Dr William Burnet published a report on the effects of mercurial vapours in 1823.

Minamata Convention: UNEP limits mercury

The United Nations Environmental Programme (UNEP) agreed the Minamata Convention at Geneva, Switzerland, in January 2013 and opened it to signatures in October 2013 in Minamata, Japan. It phases in restrictions on amalgam fillings with mercury.

Minamata and mercury poisoning: industry and government inaction

In 1932 a Chisso factory began to produce acetaldehyde for making plastics. The mercury from the factory leaked into the bay near the Japanese fishing village of Minamata. The villagers ate local fish and shellfish with high levels of mercury in the organic form of methyl mercury chloride. By the 1950s mercury poisoning was apparent in people stumbling, losing balance, unable to write or do up buttons, slurring their speech, dropping chopsticks at dinner, having difficulty hearing or swallowing, trembling or shouting uncontrollably. Cats which ate fish remains were 'dancing' in the street or collapsing and dying or falling into the sea in 'suicides', and crows which fed on polluted fish dropped dead from the sky. Nearly 100 people were affected and over 20 died, while children were born with the 'disease'. An investigation started after 21st April 1956, when a five-year-old

girl suffering these symptoms was examined at the Chisso factory hospital. At first it was assumed to be a contagious infection and houses were disinfected. A team of doctors and university researchers, however, announced on 4th November 1956 that the “Minamata Disease” was actually a heavy metal poisoning.

At first the heavy metal was assumed to be manganese. In 1958 McAlpine, a British neurologist, suggested mercury. Evidence linking the mercury poisoning to the Chisso factory emerged in 1959. Chisso stopped its company doctor’s research in 1959 after cat “400” developed typical symptoms and died after being fed company wastewater. The company and government apparently funded research to show the disease had causes other than mercury. Later a former Chisso president admitted the company promoted a theory of dumped explosives although it knew it was unfounded.

The sediment in Minamata bay is contaminated with mercury and fishing is now banned. The

first legal case for compensation came in 1970. Although the cause was identified in 1959, Chisso did not publicise it and apparently continued to dump waste. Chisso was therefore found legally liable for negligence in 1972. Over \$611M has been paid in compensation to victims.

The Chisso factory employed 60% of the town’s workforce and generated half the tax revenue of the city of Minamata. The factory manager later allegedly admitted that the company put profits before safety. The government at first supported Chisso. The residents and fisherman whose livelihood and health had been destroyed formed a Mutual Help Society. There were sit-ins at Chisso headquarters and tents on the pavement outside. Justice was done but only late and after efforts from people affected and others, and not through pro-active willingness by the polluter or government. The government accepted methylmercury poisoning from the Chisso factory as the cause of this “pollution disease” in September 1968, four months after the Chisso

factory stopped production of acetaledyde and 12 years after the cause had been discovered.

New patients, however, appeared in the 1970s and 1980s, sometimes with symptoms limited to, for example, numbness or tingling in the extremities, frequent headaches or problems in concentration. The government eventually agreed to verify patients, with 1,760 victims verified so far, and 3,000 more awaiting verification, of whom 412 have already died. Over 8,000 have been denied status. Some estimates suggest 10,000 current victims and over 3,000 deaths. (see: Douglas Allchin, “The Poisoning of Minamata”; the Stockholm Appeal on Minamata Disease, July 1972; Jonathan Watts: “Mercury poisoning of thousands confirmed: Thirty years on, the victims of Japan’s worst case of industrial pollution are getting support from scientists and the courts – but not the state” The Guardian, 16th October 2001; Keiji Hirano: “Mercury pact falls short on Minamata” The Japan Times, 1st March 2012)

PARACELSUS CLINIC AND DR THOMAS RAU

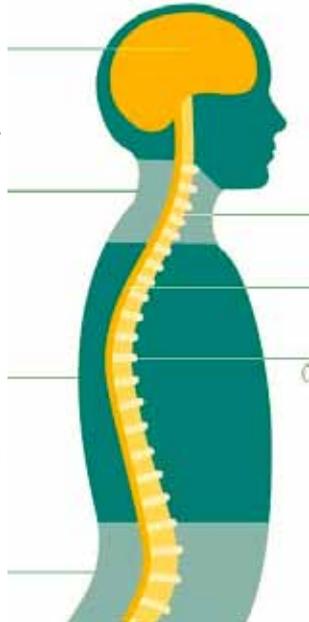
Paracelsus sees 3,000 EHS patients a year

These are some notes from a transcript by emrstop.org of an interview by Electromagnetichealth.org with Dr Thomas Rau, medical director of the renowned Swiss Paracelsus Clinic, posted on 18th September by Mieuxprevenir’s Towards Better Health. Of the Paracelsus Clinic’s annual 10,000 patients, some 3,000 or nearly a third are ES patients.

Criminal to expose children: Dr Rau is forthright: “It is criminal, unethical to expose children to EM clouds. Putting it in schools is very bad. The children’s IQ will decrease. Does society really want to have intelligent well educated children or not? We will have more ADHD children.”

Heavy metals: People with heavy metal loads in the body tend to suffer much more from EM radiation as compared to those who do not. The heavy metals might well be absorbing the EMR: root canals, amalgam fillings, implants, etc. can be the problem. For instance, a large, solid 35-year-old man became sick with trigeminal neuralgia. Many diagnoses saw it as “idiopathic”, meaning they didn’t know and he had to live with it. He even became suicidal. The Paracelsus clinic saw that he had a root canal and amalgam filling. He had the filling for 20 years before a mast was installed near his home. He had the amalgam filling removed and moved, and had total remission from the sickness.

Symptoms: Of the 3,000 EHS patients the Clinic sees annually, not all feel actual pain. Symptoms of EHS include headaches, deficiency of concentration, back pains from cervical and lower spine (tension of muscles becomes more spastic and continuous pressure/tension exacerbates the problems). With migraine presenting, the first test is for “electromagnetic cloud”. They need to remove problem devices, especially portable house phones (DECT). Very frequently patients suffer sleeping disturbances.



Bioresonance is used to measure unconscious functions of the parasympathetic and sympathetic nerve system. They should be in balance and yet they are not with EHS and the EM cloud.

EM and cancer: the clinic treats many cancer patients at all stages. Since the relationship between cancer and EM exposure is now known, all are tested for EM sensitivity. “Nowadays I am really convinced that EM emissions/loads from different sources are a very important factor in the building of all cancers. What is very important is that the EMR load leads to a deficiency of the pituitary gland; sleeping disturbances for example; regulation of the thyroid and adrenal gland. The stress capacity decreases significantly and this is the major factor that makes patients weak when they have EMR exposure. All our patients need remediation from EMR.” They train cancer patients to avoid things like cordless phones, which are even worse than mobile phones, and TV etc in the bedroom which contribute to EMR load.

Parkinson’s: several patients profit greatly from EMR advice. Alzheimer’s is difficult as it does not help so much even though EMR might be a causative factor. Also mental problems, depression, anxiety, concentration deficiency and sleep disturbances all profit very much from EM training.

Autism: “I doubt that many children are born with autism; they normally regress. At birth we can’t judge. They are vaccinated, and we think vaccination has a very bad effect for building autism. And combine that with the EMR and it blocks the brain activity, it loads the brain, and this is just ‘fatal’ to the child. It is very important that the autistic child keeps away from the EM cloud.”

Impairments: all aspects are possible. Some patients are invalids, while some are compromised. They ask patients: when they have symptoms, what it is like when they go on holiday, whether they use a mobile phone, and whether they have tinnitus. Tinnitus is maybe 90% related to EMR.

Micro-organisms: There are more organisms than cells in our bodies. Cultures of normal human endogenous bacteria grow much less when exposed to EMR. They grow less near a mobile phone, a mast or a cordless phone. Growing less good bacteria in your body means you will have an overgrowth of bad bacteria which can result in things like Lyme’s disease. Many patients, especially from the east coast of the USA, have Lymes. Antibiotics only make it worse. The good bacteria have to be reimplanted and within 6 weeks the Lyme’s patients get well or much better. Toxic mould in homes grows much faster under high EM loads and a disturbed milieu. Mercury or heavy metals can also exacerbate the growth.

Political changes: Lichtenstein put the resolutions restricting EMR into law. An area in the south of France is creating a white zone for EMR. Europe may be more aware of the issue than the USA since it has different radio stations and numerous opinions. The northern countries of Scandinavia are advanced. For example in Sweden they have stricter laws on power stations and it is forbidden to put amalgam in teeth. Things are getting better as good information proliferates and patient groups get more active, like institutes such as the geopathological institute and advocates against EM clouds.

Social interactions: With EMR the sympathetic action increases, while the parasympathetic decreases. By increasing the former you get more animosity, more aggression and a less peaceful approach. This interferes with the whole of society very much.

Governments’ duties in this crisis: If politicians were listening and fulfilling their duty, and not just industry’s wishes, then they would have the duty to reduce EM loads. It is not only the politicians that are the bad guys, but also the individual who is prepared to use all these technologies. “I ask patients about their use of mobiles, DECTs, TVs, and do you take minerals and trace elements? Have you ever been to a biological doctor who has tested your resistance to EMR. I see that they do nothing, so who wonders when they are sick. It is like running on a road with lots of traffic... do you look left and right before you cross? Yes, they do that with the road but not with other issues that can hurt you.”

The Paracelsus Clinic: a personal viewpoint: “you can’t go back to life as it was before”

According to reports on Remedy Spot on 6th October 2011 there were then 56 staff at the clinic, all specialists in EHS. “You can’t bring a cell phone into the building. Their dentists and dental equipment are the best in the world. All of the metal is taken out of your mouth, including root canals. Teeth as required are replaced with Zirconium implants. You feel no pain because you are given pulsating magnetic field therapy to grow the bone and it works as a pain killer at the same time. You are given a strict diet based upon your alkalinity and blood type. You are tested with complicated German-Swiss machinery. Rife-like devices are used to kill micro-organisms, increase blood flow

to the brain, hands and feet. You are there for two weeks in a hotel that they own which has no wireless, and you follow a strict diet. You are prescribed homeopathy, far-infrared saunas and Schumann low frequency pulsating EM fields. It’s incredibly expensive: the people that I met were rich, real estate agents, CEOs, shopping mall owners etc, paying \$10,000 and up. This Swiss clinic is a very famous one for the people in Hollywood, especially for dentistry. It specialises in EHS patients and has an extremely good success rate. But I met people that had been there several times because they go right back to doing what they were doing and then get ill again. So you can get better but you can’t go back to life as it was before. They do not create a bubble for you to live in.”

EARTHING

To Earth or not to Earth?

Many thanks to Caduceus (www.caduceus.info, and simon@caduceus.info, edited by Simon Best, the co-author of the important book “Electromagnetic Man” (Dent 1989) who used to produce “Electromagnetics News”), and Roy Riggs, BSc, for allowing ES-UKNews to reprint his article “Benefits of Grounding” from Caduceus, no.86 (Summer 2013)pp.13-14. He discusses the health benefits of grounding and gives some cautionary advice, as well as warning against ‘SMART’ meters and electrical equipment in the bedroom. He is a consultant for the International Institute Building Biology and Ecology and geopathic and EM energy surveyor (www.royriggs.co.uk).

Introduction: earthing and body voltage

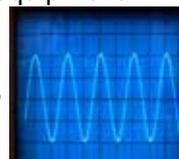
Regularly earthing the body to ground to stay healthy is not so much a great idea but a design necessity. We were born with bare feet and our correct relationship with intrinsic Earth energies, such as the Earth’s magnetic and electric field, is for our bodies to be connected with them and, thus, part of the Earth’s harmonic flow. When your feet touch the ground millions of electrons from the earth flow through your body

neutralizing free radicals, calming inflammatory processes, normalizing cortisol production, increasing melatonin production and enabling optimal nervous system functioning. [1] At my introductory courses on geopathic and electromagnetic stress one of my first experiments is to assemble my students on the grass outside for comparative body voltage tests. Normally the results read: with shoes, 0.2 mV to 15 mV, depending on the shoe’s conductivity; with bare feet, 0.2 to 0.0002 mV, thus demonstrating the effect of the Earth’s electron shield protecting the body from opportunistic static.

Step back into the building and your body voltage will immediately increase to between 300 and 2,000 mV, depending on how near you are to any electrical equipment.

Autism linked to high bedroom fields

I have been measuring people’s body voltage weekly on a regular basis since 2006 and find the worst increase is where people sleep. This results from the bed’s location vis-a-vis electric sockets and the head’s proximity to the nearest wall, to which all static is attracted due to its connection to Earth.



Body voltage at sleeping places is therefore usually between 2,000 and 13,000 mV. Research by Dr Dietrich Klinghardt, MD, at his academy in Seattle, Washington, has found the development of autism in children directly linked to early exposure to high levels of EMF in the womb, where it becomes hugely concentrated. His research revealed that where high levels of body voltage were found in the beds of 10 mothers, the child became autistic later in life, compared to 10 pregnant women sleeping in a low or normal body voltage area. Unfortunately, due to the small sample size, despite the high statistical probability, no journal has been prepared to publish his results.[2]

I have had several cases in the UK and USA where I have visited the homes of autistic children and reduced their exposure to wireless radiation as well as reducing their body voltage by up to 95%. Parents have given me positive feedback on improvement on their child’s degree of autism. Similar studies carried out by Dr. George Carlo show positive results linked to the reduction of wireless radiation in the home environment of autistic children.[3]

This and other evidence endorses the benefits of sleeping earthed, enabling your body voltage to fall to about 95% of its pre-measured value. Thus, I have countless emails from satisfied clients who have benefited from sleeping earthed.

'Earthing shoes' warning

However, a word of caution about wearing 'earthing shoes'. As stated, when you stand on a natural grassy area barefooted or wearing earthing shoes you are connected, and at one with the natural low, healing energies of the Earth.

But this is not the case if you live in a town, the reason being that the zone under a pavement and the road environment are strewn with high voltage electric cables which can create a considerably high and variable AC floating electric field above the road and pavement surface.

In many built-up areas the electricity companies often connect neutrals from different substations together. This can produce unpredictable 'net currents' which flow around the system the wrong way and can give rise to high magnetic and corresponding electric fields over an area of about 4 or 5 streets.

Stray currents and 'dirty' electricity [4] due to faults in the neighbourhood electricity system and mobile phone masts constantly switching from AC to DC fields also transfer their way along underground gas and water pipes adding further chaos to the secret subterranean life of a town. Walking along the pavement or crossing a road wearing earthing shoes will therefore have the opposite effect from that intended, by increasing rather than lowering your body voltage.

In an experiment I tested my body voltage walking along the pavement and across the road from where I live in a residential area in Hove, East Sussex. My insulated

training shoes gave me an average body voltage of 9 mV, whereas walking the same route barefooted gave me a fluctuating body voltage of between 20 and 189 mV. Thus wearing earthing shoes or walking barefoot in an urban environment will give you on average a body voltage three times higher than if you were wearing insulated soles. Based on this observation I would save your earthing shoes for walking in the countryside where the Earth's natural electric field is uncontaminated by man-made high voltage power cables.

A sudden rise in body voltage can make some people suffering from ES quite ill. One of my clients complained of feeling ill every evening at 7.0 pm. On investigation I measured her body voltage increase from 330 mV to 920 mV at precisely that hour. Cause: her electric central heating timer switched on at that precise time causing a sudden rise in ambient electric field float. Another client was able to prove to her disbelieving husband that she was ES by blindfolding herself in the car passenger seat and telling her husband the precise moment he drove under an overhead electric pylon, because it made her feel quite dizzy.



In the country

I do not wish to give earthing shoes too much of a bad name, so I will describe a little experiment I carried out recently whilst walking my dog along a country lane near Devil's Dyke in Sussex. Walking

with earthing shoes, leather soled shoes or barefooted through the countryside will keep you body in harmony and in equilibrium with the earth's natural voltage of between 0.2 to 0.0002 mV.

Very infrequently you may walk under an overhead power line, which is normally 66,000V line (66kV). Walking under the pylon wearing my rubber soled shoes my body voltage increased from 8 mV to 20,000mV. Walking under it with earthing shoes or bare feet my body voltage increased from 0.2 mV to 32 mV.

The effect of earthing shoes on natural terrain is to throw an electron protective shield (Faraday cage) around the body through which an external field cannot penetrate. In damp walking conditions, even though you are wearing rubber soles, your leather uppers will be damp, which will cause electron jump from the Earth to the leather and your feet, in which case you will be walking earthed. So even in the countryside earthing shoes will have a limited effect when walking on dry ground or under an electricity pylon.

'SMART' meter removal

A few weeks ago I visited a client who had a severely affected autistic child who was also ES. His mother had read widely on the subject and had already changed her DECT cordless phones for landline phones and changed her energy-saving light bulbs for the older, and more environmental friendly, incandescent bulbs. My task was to survey the house and make any further recommendations that would cut down EM pollution.

There was little to do other than advise on how to hard wire her internet connection using a home Ethernet connection system through her mains, changing the dimmer switches (one of the major causes of dirty electricity) and sleeping earthed. These were straightforward procedures.

However, the outside wall of her child's playroom had two 'SMART' meters attached, one for her electricity and the other her gas supply. As these were already fitted I envisaged a prolonged battle with her supply company to have them removed and changed for the older digital number type. I armed her with copious links to 'SMART' meter help forums (www.stopsmartmeters.org.uk) and asked her to keep me in touch with any progress or obstacle met. She contacted her energy supplier the next morning, explained the situation with her electrosensitive, autistic son and requested the 'SMART' meters to be removed. Contrary to her expectations, the energy company was sympathetic and removed the smart meters the same afternoon, fitting two of the older, non wireless, meters. This is encouraging and hopeful for everyone, though not all energy companies may take the same enlightened view.



Bedroom case study

These pictures are taken from a house I surveyed recently where a mother was worried that her two-year-old daughter may be affected by EMFs, as she sleeps badly and cries a lot during the night, but sleeps peacefully when sharing her mother's bed. There was a mobile phone mast nearby, which she thought might be the problem.

My method of surveying a room follows a fixed format:

1. Test for geopathic stress; in this case none found.
2. Scan the mattress with a geomagnetometer to see if there are any unnatural deviations of the Earth's DC magnetic field (usually caused by bed springs or metal objects placed under the bed); in this case none.

3. Measure the ambient AC electric fields across the bed. Normal reading is 4-15 v/m, but in this case it was 27 V/m. Powerwatch UK advises that your sleeping area should be under 10 V/m, but 4 V/m is easily achievable.

4. Measure the ambient AC magnetic field across the bed. Normal readings are 20-90 nT, but in this case it was 425 nT. (Scientific evidence confirms a doubling in incidence for childhood leukaemia at power frequency magnetic fields of 400nT [0.4 μT] and above.(1)) The cause of this high reading was the transformer linked to the baby monitor in close proximity to the bed. This is approximately the field strength one would expect 60 meters away from a 400 kV overhead transmission line.

5. Measure the microwave frequency pulsed electromagnetic fields at bed level. These would normally be the result of WiFi, DECT cordless phones and external mobile phone masts. Normally this type of radiation measures in peak mode 0.20-0.02 V/m, but, because of the near vicinity of the DECT baby alarm monitor, the readings around the child's head pulsed up to 6 V/m. This level is far above what many countries and organisations consider safe.

6. Measure body voltage at the sleeping place. Average readings should be about 2,000 mV, but in this case it was 13,000 mV.



All fields measured were unusually high and none were linked to the mobile phone mast 400 meters away and not in sight of the house.

If you placed the same cot in a rural Indian hut not attached to mains electricity the reading would be

zero electric and magnetic fields. Body voltage would be in harmony and in equilibrium the earth's natural electric field between 0.2- 0.0002mV.

Remedy: clear all the electric clutter and extension leads from under the child's bed to at least 3 feet away. Change the digital DECT baby monitor for an analogue one.

This case study is by no means isolated and in many ways reflects what is increasingly becoming the norm with an almost daily influx of plug-in electrical items available. For information on children sleeping in high magnetic fields and international guidance levels for EMF exposure see:

www.powerwatch.org.uk/health/leukaemia_emfs_20080428.pdf
www.powerwatch.org.uk/science/intguidance.asp

Summary

We survive the electromagnetic waves of solar radiation by wearing hats, keeping in the shade and sleeping in the dark. Our exposure to man-made EM radiation is constant, ever-increasing and pervades both shade and darkness. You can take action now to protect yourself.

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CRITICISMS OF PHE'S AGNIR AND ICNIRP

"Voodoo science": a member of PHE's AGNIR criticized yet again: ants have not "watched the TV news"

In the ES-UK September 2013 Newsletter there was a report of the stringent criticisms by Prof. Dariusz Leszczynski of Dr Rubin, a member of Public Health England's Advisory Group on Non-Ionising Radiation, the people responsible for the very high level of radio exposure in the UK according to the Rt Hon Jeremy Hunt MP, the secretary of state for health. Prof. Leszczynski criticized Rubin for using "Voodoo science" and "pseudo science" to claim that ES is purely psychological. This followed Prof. Andrew Marino's criticism, in the International Journal of Neuroscience, of Rubin's refusal to accept the non-linear implications of the 2011 study by McCarty. Yet another study, this time on how ants react to EM exposure, criticises Rubin's controversial psychological hypothesis: "Finally, one very elegant feature of using ants as experimental animals is – as for other animal species, plants and bacteria - that they do not lend themselves to psychological explanatory models, such as mass media-driven psychoses (Witthoft and Rubin, 2013). If they react to artificial EM fields, it is not because they have listened to radio broadcasts, watched the TV news, or read columns in tabloids. No, then they do react to the actual adverse environmental exposure." (Cammaerts and Johansson, "Ants can be used as bio-indicators to reveal biological effects of EM waves from some wireless apparatus", *Electro Biol Med.*, 2013).

PHE/AGNIR against the World Health Organisation

PHE and AGNIR, in supporting Rubin's flawed and controversial psychological hypothesis for ES, appear to repudiate the WHO Environmental Health Criteria no. 238 (2007) on ELF and Health, p.136: "These symptoms are not explained by any known medical, psychiatric or psychological disorder."

PHE's AGNIR member wants to halt to ELF research on breast cancer; scientists disagree

Maria Feychting, a member of PHE's AGNIR, which is responsible for high levels of radiation in the UK, and thus for ES, according to the Health Secretary, Jeremy Hunt, wants to stop wasting money on any more epidemiological studies of breast cancer risks from power-frequency EMFs (ELF). In an invited commentary in the American Journal of Epidemiology she wrote: "We can be confident that exposure to ELF magnetic fields does not cause breast cancer." This was prompted by the failure of a study among Chinese textile workers to find an association between breast cancer and ELF EMF. This would challenge the effects of ELF which, like light at night, reduces the anti-oxidant melatonin produced at night by the pineal gland, as first proposed in 1987 by Richard Stevens.

Stevens referred to work by Löscher in Germany, showing from 1993 that ELF EMFs play a role in the formation of breast cancer tumours. But, as Microwave News reported on 1st February 2004, Gary Boorman of the USA's NIEHS, "began a dirty tricks campaign to discredit Löscher." In 2004 Löscher showed how different strains of rats with different genetic susceptibility gave different results. Löscher's work is important since, if he is correct and EMFs promote breast cancer, "his animal data would support the epidemiological association linking EMFs to cancer and bump up the classification of EMFs from a possible to a probable human carcinogen", from 2B to 2A. In fact international scientists would now classify EMFs as class 1 certain, according to the BioInitiative Report 2012. Sobel, who first linked ELF and Alzheimer's in seamstresses in 1994, said: "There's strong evidence that low levels of melatonin are a risk factor for breast cancer and relatively moderate magnetic fields affect circulating melatonin. It is very likely that there is a link between magnetic fields and breast cancer." Sobel noted that Hutchinson's study included the entire history of the women's exposures, but "What happens early in life may not be as important as what happens later in life." Sam Milham, the first to link EMF and leukaemia in 1982, said "Whatever causes male breast cancer causes female breast cancer." Male breast tumours are thus a sentinel cancer for EMF exposure, just as mesothelioma is for asbestos, as evident in a meta-analysis of 18 studies showing an association between EMF and male breast cancer (Sun J-W et al, *Asian Pac J Cancer Prev.*, 2013). Milham believes that exposure assessment should measure high-frequency transients and harmonics; the Hutchinson meter does not pick up signals over 800 Hz.

PHE's AGNIR and conflicts of interest

Mona Nilsson, the Swedish journalist who pointed out Anders Ahlbom's incomplete disclosure of potential conflicts of interest (COI) which led to his withdrawal from the IARC panel in 2011, is now asking the editors at the American Journal of Epidemiology whether Maria Feychting, a member of PHE's AGNIR, neglected to disclose her own potential conflicts in her COI statement for her new commentary, according to Microwave News on 26th September. At the end of the paper Feychting wrote: "Conflict of interest: none declared." Nilsson is circulating a COI statement filed by Feychting on 30th March 2012 where she included: co-investigator of "EMF and childhood leukemia survival – a pooled analysis" funded by the Electric Power Research Institute (EPRI). EPRI is the electric utility industry group where where Kheifets used to work full time and is now a consultant. "Over the years, few organizations have done more to derail and obfuscate EMF research than EPRI." (MN) In addition to PHE's AGNIR and ICNIRP, she is also a member of ICL's Airwave steering group, the WHO's core group for a RF risks monograph, co-investigator, with Ahlbom as principal investigator in Sweden, of COSMOS which

is funded in part ultimately by TeliaSonera, Ericsson AB and Telenor. In 2011 Feychting listed funding from also the Mobile Manufacturers Forum, the GSM Association, and the Mobile Telecommunications Health and Research Programme.

PHE's AGNIR as part of the pro-industry pressure-group ICNIRP

"Does ICNIRP Speak for Public Health?" is the heading for a report by Microwave News of 6th July 2011, updated 25th September 2013. "The controversy over whether cell phones lead to tumors is not some intellectual exercise like counting angels on the head of a pin. It's about public health, and you can't get more "public" than when you're talking about the health of 4-5 billion users of cell phones." The report then gives "the facts": 3 different types of tumours have been linked to long-term users of mobile phones and 2 independent groups have documented associations with glioma and acoustic neuroma. Microwave News asks whether two members of PHE's AGNIR, Feychting and Swerdlow, along with other ICNIRP epidemiologists, are "really so sure that they are right that they are willing to throw out all the studies including their own [Interphone]?"

(PHE) NRPB: "instructed not to admit to any adverse effects"

Dr Mike Clark, a spokesperson for NRPB (now PHE/HPA), apparently said of the health damage from mobile phones: "We are instructed not to admit to any adverse effects", according to evidence to the House of Commons Science & Technology committee in 1999 (Appendix 6: Powerwatch Memorandum, 3.13: www.publications.parliament.uk/pa/cm199899/cmselect/cmsstech/489/489a11.htm)

"Voodoo Science" from ICNIRP's Croft as well as PHE's AGNIR's Rubin

The psychologist Rodney Croft, from the University of Wollongong's School of Psychology, in 2012 joined the private pro-industry pressure-group ICNIRP (International Commission on Non-Ionising Radiation). He is also director of the Australian Centre for Electromagnetic Bioeffects Research. On 24th August he was quoted by the Illawarra Mercury as making the extraordinary claim about the well known harm from mobile phones, where the radiation was classified by the World Health Organisation's IARC in 2011 as a 2B cancer agent: "There's a pretty strong consensus that there's not a problem in adults." Croft's claim has been called "Voodoo Science comments" by Prof. Dariusz Leszczynski, a member of IARC and a leading expert in this field, who stated on 28th September: "There is absolutely no consensus among the scientists", except perhaps for "a pre-selected private club called ICNIRP". Prof. Leszczynski has also called the failed psychological studies by the psychologist Rubin, a member of the pro-industry group AGNIR run by the UK's PHE, "Voodoo Science" and "pseudo science".

The ICNIRP may be wrong: "Stop following what ICNIRP says"

Professor Dariusz Leszczynski commented on the private club ICNIRP, a pressure-group spun out of the nuclear weapons industry with the aim of maximising radiation levels, that "It is clear from their choices that the new members are selected based not only on their scientific merit and stature but also on their opinion on risk. In this way, ICNIRP always consists of scientists with similar opinions. This prevents real scientific debate." He then asked, in his Washington Post comment of 17th October: "What will happen if ICNIRP is wrong? ... Who will be responsible for health problems if ICNIRP is wrong?" Prof. Leszczynski argued that the ICNIRP may be wrong, because in 2011 WHO's IARC voted 28 to 2 to classify mobile phone radiation as a possible carcinogen, but ICNIRP stated the opposite, even though many IARC members work or worked for ICNIRP. "The telecom industry should stop blindly following what the ICNIRP says." "The scientific evidence indicates that the safety standards are inadequate to protect adult avid cell phone users." And what about children, pregnant women, old persons or people with disease?

Pro-industry ICNIRP against research: instead "wait and see if tumor rates go up"

ICNIRP is a "self-perpetuating group that declines to disclose its finances"; its Standing Committee on Epidemiology "has only welcomed the like-minded", according to Microwave News on 6th July 2011 and 25th September 2013. Its previous chairman, Anders Ahlbom, resigned from IARC after he allegedly failed to declare that he was a director of a company involved with the mobile phone industry. He was the lead author, with PHE's AGNIR's Feychting and Swerdlow, and the other anti-research members, Kheifets and Savitz, of an ICNIRP review of mobile phones and cancer, which claims in the Abstract that "Overall the studies published to date do not demonstrate a raised risk for any tumor of the brain within approximately 10 years since first use; ... Also for longer latencies, the available data do not suggest an association between mobile phone use and fast-growing tumors such as glioma."

Microwave News concluded with: "What's the game plan for finding out whether cell phones cause cancer? ICNIRP says that we should simply wait and see if tumor rates go up." The downside: "If we see a measurable uptick in the next decade or two, we'll know that ICNIRP gave us some bad advice."

Pro-industry pressure-group ICNIRP against ELF research

Feychting, vice chair of ICNIRP, has now joined pro-industry activists who want to end various types of EMF research, according to Microwave News on 25th September. In 2010, Kheifets, from the USA electricity companies' EPRI, and Swanson from the

UK's National Grid, both scientific advisors to ICNIRP, also called for an end to the study of ELF electric fields. Also in 2010 Schmiedel, of the Danish Cancer Society, infamous for a study which discounted the likely heaviest mobile users, and Blettner, the lone dissenter against IARC's classification of RF as a 2B cancer agent, called for an end to epidemiological studies of EMFs and childhood leukaemia. Ironically, Feychting started her career with a study linking EMFs to childhood leukaemia, as did Savitz, author of another "Enough is Enough" article against ELF research. When the larger group of international scientists behind BioInitiative 2012 declare ELF is a class 1 certain cancer agent, observers can see why the pro-industry pressure-group ICNIRP is so worried.

ICNIRP and WHO in muddle on non-thermal electro-stimulation and ES

The ICNIRP's attempt in 2010 (Health Physics) to justify its extraordinarily high heating-only limits for ELF (frequencies <100 kHz) curiously accepted electro-stimulation at non-thermal levels, but at the same time rejected the evidence for ES at non-thermal levels. The latter was based on a psychological evaluation by Rubin, whose understanding of the non-linear nature of ES has been shown to be flawed (see under "Voodoo science" in AGNIR criticism), and whose 2005 analysis covered mainly RF psychological tests rather than ELF studies. In fact the WHO Environmental Health Criteria no. 238 on ELF of 2007 claimed that ES "symptoms are not explained by any known medical, psychiatric or psychological disorder," while quoting Rubin's mainly RF hypothesis as evidence, even though Rubin claimed a psychological explanation which the WHO explicitly rejected. The WHO fact sheet 322, also on ELF, simply stated that the evidence for the other adverse health effects caused by ELF is "much weaker" than for childhood leukaemia, an effect discovered in 1979 and now accepted by almost all scientists, but it did not clarify the strength or significance of the evidence. Neither ICNIRP nor the WHO are advised by leading medical doctors involved in diagnosing and treating people with ES, and both are influenced by pressure from the wireless industry and governments, so this chaotic situation is not surprising. People suffering the effects of ES deserve the support of medical experts in this field rather than unproved "Voodoo science" hypotheses from groups like PHE's AGNIR, the ICNIRP and WHO.

ICNIRP lacks expertise on ES: ICNIRP member denies evidence on ES

Another extraordinary claim by the Australian psychologist Rodney Croft, reported in News.com on 29th September, was that there was "absolutely no evidence" of people suffering sensitivity to EM radiation and "The research is well and truly in the court of it not having an effect, but people are still complaining." [ES was first described in the scientific

literature in 1932. It was classified by the international Nordic Council of Ministers as ICD-10.R68.8 in 2000, and by the Austrian Medical Association as ICD-10.Z58.4 in 2012. It was described as a "disabling condition" with "real" symptoms, and not a "known psychological disorder" by the WHO in 2005-07. It has been recognized in courts and tribunals around the world and has been experienced by many thousands of people, including doctors, scientists and psychologists. It is therefore unclear whether Croft has been accurately reported, or was referring to some other condition, or, as a psychologist, is not as up to date in his knowledge of the science of ES as the medical doctors around the world who diagnose and treat thousands of people with ES. Like PHE's AGNIR, ICNIRP has no medical doctor experienced in diagnosing and treating people with ES. - Ed.]

ICNIRP member paid by Australian government to "debunk" critics

A research team led by Prof. Rodney Croft, a psychologist and a member of the pro-industry private pressure-group ICNIRP, is to be paid \$5M over five years by the Australian government partly to "debunk" critics, according to a GSMA press release on 26th September. In addition to a sleep study on children, it will apparently aim to silence independent scientists: "Another research focus will be on debunking criticism by activists and the researchers will also look into the role EM energy plays in people who claim to be sensitive to wireless signals." [In fact the scientific majority has accepted adverse effects from non-thermal EM exposure since 2008, as shown by IARC's classifications in 2001 and 2011. Should governments be using tax-payers' money for psychologists to "debunk" medical evidence criticizing their controversial hypothesis? Should tax revenues and industry profit be put before ordinary people's health? - Ed.]

Croft on ES health impairment: "a big problem", "what's actually causing it?"

Croft said about health effects from EM exposure, according to iTnews on 10th September: "We're at a kind of difficult point because a lot of people are suffering. When you look at the distribution across most first world countries, you find it's around about 3-to-8% of people [that] report quite significant health impairment due to this [condition]. It clearly is a big problem that needs to be dealt with, but the issue is what's actually causing it?" He claimed scientists have still not found the cause: "If RF isn't involved, what do we classify ... someone [that] reports symptoms that we can't find a known cause for? And that gets a little bit more tricky." [Scientists identified the cause in 1932; a few psychologists, like Croft, do not appear to be fully briefed on this medical condition. - Ed.]

ES EXPERIENCES

Moving to escape EM exposure: “betrayed by government ... democracy is on shaky grounds”

Benita Schluschen, a former Alberta Telecom (Telus) employee, wears RF-shielding in her hat when she goes out. She can feel sharp pains in her head and nausea near a mast and can tell when a store has WiFi, with her meter proving her right each time, according to the Alberni Valley Times on 15th July, Alberni Valley News on 18th July, and Oceanside Star on 24th October. She can tell when someone is carrying a mobile phone since she feels pressure in her head, and can distinguish the different pulses from WiFi. She also gets heart palpitations, tinnitus, has trouble focussing and her legs become rubbery. She suffers from hypoxia, oxygen deprivation caused by a thickening of the blood, although she says we all suffer from it because blood cells become clumped “like money rolls” after just 90 seconds of EM exposure: “It’s just a matter of sensitivity and tolerance.” The Schluschens moved from Chartwell in 2009 to Port Alberni with lower levels of radiation, where they had to surround the wireless ‘smart’ meter with a Faraday box; 60,000 other people in British Columbia are also refusing wireless meters but they will have to pay \$35-a-month for manual readings: “We feel betrayed by the government, by the utility, by the medical community for allowing it. Our rights have been usurped ... By now it’s not a mistake any more; it’s an outright lie. They deliberately misrepresent the facts, and that’s what I find so distasteful. Democracy is on very shaky grounds.”

Allergic to radio waves: “a living hell”

Christiane Le Dauphin, 35, a resident of Boistrudan, lives a living hell. She is allergic to mobile phones and WiFi, just as others are allergic to gluten or eggs. On 6th September, according to Bretagne France 3, she

began a hunger strike and demanded the creation of areas without radio waves. She moved to Boistrudan in Ille-et-Vilaine two years ago. Until then she lived in Rennes, but her life was in danger. In Boistrudan she had fewer headaches and slept almost normally, with fewer digestive and memory disorders. She wants to live in a ‘white’ area free of man-made radiation pollution. She almost never leaves home. She use a protective net on the head and for a sleeping bag.

WiFi forces IT consultant with ES to lose job

Guy Hudson, a 58-year-old IT consultant has suffered ES symptoms for the last eight years, according to CRI News on 8th October. It began with headaches but developed into 24/7 debilitating pain, forcing him to give up work. It was when he had WiFi installed that his symptoms noticeably worsened.

French ES accounts: “it’s isolating”

According to a long article by Audrey Garric in Le Monde on 30th August, called “People sick from electromagnetic waves who ‘survive’”, EHS people suffer from “headaches, heartburn, insomnia or tachycardia” from mobile phones, WiFi networks or mobile phone masts. They need increased medical consultations, changes to their homes, protective clothes and sometimes escape from ‘civilisation’. On 26, 27 and 28th August they met in a secluded valley at Boulc (Drôme) to request the establishment of “urgent” white areas with no radio frequency.

Anne Cautain, 57 and very highly electro-sensitive, lived for three years in a cave. She feels “burned” by any wavelength, whether WiFi, mobile phones, or home appliances, but also by extremely low frequency (50 Hz) current in electric cables. “Since 2009, I am a true camera, I know that in a given place there is an antenna

or a transformer; I feel the power in my nerve endings,” she says, with red cheeks, barefoot and connected to a steel post sunk into the ground to “unload”. The journey to reach Boulc from the Hautes-Alpes, where she lives in the former stables of a forest house with candlelight and a heated stove, was exhausting. She has spent time wrapped in blankets in a converted truck Faraday cage (an enclosure sealed against EMFs), led by her daughter, on whom she totally depends. Finally, she will be very little on the site, where some waves reach her, despite the isolation.

Anne Cautain has not always been intolerant to RF. Her symptoms occurred six months after the installation of WiFi terminals at the City University of Nice, where she worked as a housekeeper. “I started to feel intense neurological pain, dizziness, memory loss and my sleep was interrupted. Then I no longer kept my apartment, located near antennas. She left overnight. After a year of wandering to escape the waves, she moved between a yurt at the bottom of a valley, a cellar restaurant, an armoured car in a car park, and a caravan. “My suffering was only a long slump. I did not know where to hide myself. I wanted to go underground,” she said with sadness in her voice.

That’s when she heard about a cave in Saint-Julien-en-Beauchene (Hautes-Alpes), in which she lived for three years with two other women, also “electro”. The inhabitants of the hamlet gave support, others brought baskets of fruit and vegetables and water, and a neighbour lends them a shower. Nevertheless, life is tough: the temperature rarely exceeds 10°C, the light is low, and Anne Cautain lost 14 pounds. The three women eventually left their refuge during the installation of 3G in the village, which they say they “felt” before being informed about it. “I know I’m going crazy,” she said lucidly. “But, even

if it is extremely hard to live, I have no choice. I do not look at the past, or what I lost in life. I survive." She receives a disability pension from social security and said: "I hope to one day find a cure and independent almost normal life, in a white zone."

Oscar, 47, a former trader, continues to live and work in Paris for banks. He is the opposite of the caricature of the electro-marginal and disturbed person. Oscar, a former sales trader (trader-dealer) in major international banks, has been intolerant of WiFi since 2010, and has been sensitive to EMFs for years, but continues to live and work in Paris as a teacher in schools and a freelance trainer for banking institutions, places where radio waves abound: "The days wear me down between burns inside the body, tingling and headaches. And I find it hard to recover overnight," he reflected. Sometimes it must slow down: "I had to go to New York in July to give some highly paid training. But I was out. I had to cancel at the last moment," he laments, pointing to a "very detrimental disease in professional life. Before, I worked in New York, Chicago and London. Today, it is no longer possible. I spend a third of my time trying to treat myself and get better. It changed my life."

Since the onset of his symptoms, Oscar has moved three times, finally settling near the Bois de Vincennes this summer. For him there is no WiFi (he also asked his neighbours to turn off theirs), but a wired telephone, battery alarm clock and a curtain shield. He has appointments with doctors and frequently escapes to the woods. "In the end, I have no life as a couple, no children, and a very disturbed social life. Electrosensitivity, it's isolating."

Isabelle, 52, is forced to sleep in her basement and wears a hat wrapped in a mesh woven with copper and silver. "This alleviates headaches; I feel ants in one half of my brain and language disorders," she says. In 2008, Isabelle, a

podiatrist, who prefers to remain anonymous, was taken in as an emergency by a neurologist for these symptoms. After a battery of tests the doctor concluded that she is in perfect health. "Then I realized that my troubles were caused by the antennas installed on top of a water tower 130 metres from home," she says. "Whenever I left my home, I felt better, and when I came back, it got worse again." Isabelle cannot move. Her husband refuses to leave the Isère family home. Although they had a canopy bed functioning as a Faraday cage, she moved into the cellar. And when she can, she flees her home, as between 2011 and 2013, where she took refuge in the Dordogne. "My life was left upset," said Isabella, now retired. "When I am not too exposed, I feel better."

Philippe Tribaudeau, president of the association "A land for EHS", left his job, his home and his wife. It was in 2007 that everything changed for him. As a teacher of technology he works almost all the time behind a screen in the presence of 24 other computers in the room. The room of his apartment is also 15 metres from the transformer in a secondary school, near Dijon. "In three months, I could no longer cope with the waves. I felt burns on the skin, tingling all over and a huge fatigue," he says. "I managed to finish the year but I could not make the next school year." The former teacher then took a year off work and three years off without pay. "I lived a year in a camper in the woods, sometimes surrounded by a metre of snow. My wife, who has supported me for four years, ferried supplies to me every six weeks." He was illegally occupying the forest Saoû in the Drôme between June and October 2010, before being expelled by the authorities. "We need a blank area for refuge. Electrosensitivity is a life of wandering, isolation, insecurity," he says. "We should try to live the best we can, but away from home on the road with nowhere to go is a strong psychological pressure." He said he has experienced this "leap into

the void." "I was well prepared for a solitary life: I am athletic and I love mountains. Isolation does not weigh me down." His face is weathered by the months of outdoor life: "I rebuilt a new life."

Philippe Tribaudeau, who now has been granted a disability retirement pension, made this new departure to the isolated valley Boulc in a semi-underground farm he discovered a year ago. The association, "A land for EHS", is installed there and it regularly hosts electro rallies. "I use my computer from time to time, four hours maximum, working 3m from the screen, using very long cables." He also became multi-chemically sensitive, intolerant to odours, laundry perfume or pollution. He concluded: "I live in a jar."

Maïlys, a master's student in toxicology, has been EHS since aged 14: "When I was 14, I had an anxiety attack while watching a movie, then dizziness and fatigue. This went on for months," said Maïlys, a pretty blonde who wears a blue fleece. Her mother, a therapist and herself EHS, associated these symptoms with the installation of a mobile phone tower in their neighborhood. "We reviewed the electrical system of the house, moved the bed away from the wall, removed everything that emits frequencies in the room and I protect myself with fabrics, caps and radiation-resistant scarves," says the girl. "I still have a cell phone, but I use it very little." Maïlys, now 21 years old, managed to reduce some of her pain by using a relaxation therapist. She was able to pursue environmental health studies and will enter into master 2 toxicology at Paris. "I want to live my life with my people of my age. I'll even find a roommate. But I am a little fearful of going to a big city," she admits. Although her family agreed to remove WiFi in her presence, many remain sceptical about the source of her pain. "For many of my family, including my uncles and aunts, it is a taboo subject. They think it's in my head. I scare them."

ES-UK Leaflet

It's an excellent introduction to what ES is, with notes on its symptoms and causes. Give it to your relatives and friends, or anyone interested.

It's an excellent introduction to what ES is, with notes on its symptoms and causes, updated in September 2013. Give it to your relatives and friends, or anyone interested.

ElectroSensitivity UK

www.es-uk.info

What does ES-UK do?

- ES-UK runs a helpline to support people with ES, their friends and family, to ensure there is a sympathetic ear to hear individuals' experiences and to offer information and practical help, where possible.
- We have information on ES, what it is, and what you can do about it, to enable you to improve your health and explain to others, including your medical contacts, the real nature of your condition.
- We support a directory of services and products suitable for ES people.
- We send out a quarterly newsletter keeping people informed about others' experiences, with tips from sufferers about what helps them, information about ES in the workplace and at home, and national and international news, including new research.
- We maintain a website with information and news, for those who can use computers.
- We do our best to educate the medical profession about ES.
- We do our best to educate Public Health England (PHE) and its Advisory Group on Non-ionising Radiation (AGNIR), the two government groups responsible for the UK's high levels of exposure which cause ES.
- We do our best to educate officials involved with benefits, disability issues, employment, hospitals, housing, public services, schools, shopping and transport.

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ES-UK, September 2013

Electro-sensitivity (ES) is a condition which can develop when people are exposed to things like computers, cordless phones, low energy lighting, mobile phones, mobile phone masts, powerlines, smart meters, substations and WiFi.



**Please send contributions for the ES-UK Newsletter to:
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Aims of ES-UK

1. To help people suffering from electro-sensitivity
2. To educate the public about electro-sensitivity and related areas

Support ES-UK

A donation of £15 per year, or whatever you can afford, helps with the running costs of ES-UK. Cheques, payable to ES-UK, should be sent to the BM Box shown, with a Gift Aid declaration if you wish and are eligible.

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