Before the Los Angeles Unified School District Los Angeles, California

In the Matter of:

Project Definition and Funding Strategy for Phase 1A of the Common Core Technology Project Plan

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To: Los Angeles Board of Education

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My name is Cindy Sage. My business address is 1396 Danielson Road, Montecito, California, 93108. I have been a professional environmental consultant since 1972 and am the owner of Sage Associates, an environmental sciences consulting firm in Santa Barbara, California. I hold an M.A. degree in Geology, and a B.A. in Zoology from the University of California, Santa Barbara.

I am the co-editor of both the 2007 BioInitiative Report: A Rationale for a Biologically-based Public Exposure Standard for Electromagnetic Fields (ELF and RF); and the BioInitiative 2012: A Rationale for Biologically-based Exposure Standards for Low-Intensity Electromagnetic Radiation. (See: www.bioinitiative.org) My recent publications are listed. I served as a member of the California Public Utilities Commission EMF Consensus Group, the Keystone Center Dialogue for Transmission Line Siting (a national group developing EMF Policy), and of the International Electric Transmission Perception Project. I am a full member of the Bioelectromagnetics Society.

My professional involvement since 1972 in this area includes development suitability constraint analysis, environmental planning, and impact assessment on EMF issues for more than 25 years. My company has provided professional consulting services to city

and county planners, private developers, state agencies including the California Department of Education School Facilities Siting Division, the Inglewood School District (La Tijera and Highland elementary schools), Anaheim, Las Virgenes Unified, Long Beach and Fairfield-Suisun School Districts and Fontana and Lawndale elementary schools with respect to measurement and assessment of electromagnetic fields (EMF) and radiofrequency radiation (RFR). I provided electromagnetic field (EMF) technical assistance under contract to the California Department of Education School Facilities Planning Division for transmission line siting setbacks and EMF policy. It include development of a new EMF Policy Variance and procedures to implement the policy, and preparation of a Guide to Architects and Electrical Engineers on Low-EMF Design and Building. I have been an expert witness on EMF policy, public perception, transmisson line impacts and land use issues, and have qualified both in state and in federal court proceedings as an expert witness in this area.

RECOMMENDED ACTION:

It is my professional opinion the LAUSD should implement Common Core Technology goals to 'reduce the Digital Divide' and to provide all LAUSD students with 21st century learning tools and environments by choosing wired (cable, fiber optic) methods rather than wireless technology systems. The LAUSD will place hundreds of thousands of school children at risk for illness, learning impairments and other health problems by choosing a delivery technology that produces a toxic emission (radiofrequency and microwave radiation) that has recently been classified as a Possible Human Carcinogen. It is in the best interest of the District, its Board, and the children, teachers and staff the District protects to provide healthy and safe school environments. These interests are best served if the District takes account of clear evidence of possible wireless health risks, and rejects the proposed program for wireless classrooms within the Los Angeles Unified School District. Failing to select wired over wireless technologies will needlessly expose hundreds of thousands of school children, as well as faculty and staff of LAUSD to massive new and unnecessary RFR exposures that are already designated as a Possible Human Carcinogen. The LAUSD should halt its current plan to provide wireless learning environments (wireless devices and WI-FI coverage). Instead, the Board should adopt programs to expand wired internet infrastructure and "EMF/RFR best practices" including the use of wired (CAT-6 or other), cable modem internet, or fiber optic connections instead that do not produce toxic exposures.

RATIONALE

1. Children are known to be more vulnerable to environmental toxins and carcinogens than adults. There is overwhelming evidence that children are more vulnerable than adults to many different exposures (Sly and Carpenter, 2012), including RFR (Wiart et al, 2008), and that the diseases of greatest concern are cancer and adverse effects on neurodevelopment. The LAUSD has a duty to protect the health and welfare of children, teachers, staff, students and disabled individuals on all campuses. Children, teachers and the disabled cannot remove themselves from potentially harmful wireless exposures if the LAUSD adopts programs for all-wireless classrooms and learning environments in the District.

Prenatal and post-natal exposure to cell phone radiation has been reported to cause headaches and migraines in a study of Danish children at age seven (7). In The Open Pediatric Medicine Journal (2012), a report by Sudan et al. has found an association between mothers' reports of prenatal and postnatal cell phone exposures and headaches, including migraines in seven year-old children. Children with both prenatal and postnatal exposure to cell phones had a thirty (30) percent higher risk for migraines and other headache-related symptoms. Since both pregnant women on staff and in teaching positions, as well as elementary school children will be exposed to cell phone radiation from wireless device use, the LAUSD should be strongly cautioned about introducing pervasive wireless RFR exposures in schools. This study provides support for an earlier evaluation of cell phone radiation effects by members of the same research team on the same Danish population of mothers and children. In 2008, this research team reported that maternal use of a cell phone resulted in behavioral and learning difficulties in the child by elementary school age (Divan et al, 2008).

2. Existing FCC safety standards are under formal review by the FCC (Proceeding 03-137). The US Government Accountability Office Report of 2012 recommends to the FCC that it formally reassess, and, if appropriate, change it's current RF energy exposure limit and mobile phone testing requirements related to likely usage configurations, particularly when phones are held against the body (US GAO, 2012). The existing FCC public safety standards cannot be presumed for purposes of the LAUSD decision on wireless to be protective of public health under these circumstances. The existing safety limits do not protect against chronic exposures nor against non-thermal effects of

radiofrequency and microwave radiation on human health. They are specifically not protective of children or smaller-stature individuals (they are developed to be suitable to protect a six-foot man (in stature). They address acute, but not chronic exposures. And they are not protective against biological effects of non-thermal low-intensity RFR exposures for either children, adults, or the disabled. Biological effects of EMF and RFR are considered scientifically established; and can reasonably be presumed to result in health harm with long-term exposure of the kind under consideration by LAUSD with wireless classrooms.

- 3. LAUSD must incorporate appropriate measures to address the recent World Health Organization International Agency for Research on Cancer (IARC) classification of RFR as a Possible Human Carcinogen before subjecting widespread hundreds of thousands of its District personnel and students to a preventable toxic exposure. The WHO IARC classified RF radiation as a Group 2B Possible Human Carcinogen; it joins the IARC classification of ELF-EMF (Extremely Low Frequency Electromagnetic Fields) as a Group 2B Possible Human Carcinogen. The evidence for carcinogenicity for RFR was primarily from cell phone/brain tumor studies but IARC applies this classification to all RFR exposures. LAUSD has been responsive to the need to reduce risks from chemicals in the District. EMF and RFR exposures should be considered equally in decisionmaking. The combined effects of toxic agents (chemicals) and EMF/RFR are established. Juuilainen et al. (2006) reported that the combined effects of toxic agents and ELF magnetic fields together enhances damage as compared to the toxic exposure alone. In a meta-analysis of 65 studies; overall results showed 91% of the *in vivo* studies and 68% of the *in vitro* studies had worse outcomes (were positive for changes indicating synergistic damage) with EMF/RFR exposure in combination with toxic agents (Juutilainen et al, 2006).
- 4. Biologically-based public exposure safety regulations for low-intensity, chronic exposure to RFR (radiofrequency radiation) are absent so there is no reasonable assumption by LAUSD that it can rely on outdated (1996) and highly contested FCC safety limits in this decision.
- 5. No positive assertion of safety of wireless technologies in classroom environments can be made.

- 6. The LAUSD has the obligation to ensure that all campuses under its jurisdiction are in compliance with existing law and that all classroom occupants are appropriately protected from any potential adverse effects from wireless RFR exposures. LAUSD is required by law to conduct a full risk assessment of all toxic exposures by State code and this toxic exposure is not exempt. The evidence in 2012 is greater than in 2007 that RFR is associated with increased risk for cancer and neurological diseases; immune disorders, altered fetal brain development in pregnant women; sleep disruption, and impaired cognition, memory, learning, attention, concentration, and behavior in school children.
- 7. New scientific studies of radiofrequency radiation of the kind and at the levels associated with wireless classroom environments report that chronic, whole-body RFR exposure at levels as low as 0.003 microwatts per square centimeter result in adverse health effects on children and adolescents (Thomas et al 2008; Heinrich et al 2010; Thomas et al 2010; Mohler et al 2010). Wireless classrooms will create unavoidable and involuntary exposure to RFR at levels shown to adversely affect memory, learning, cognition, attention, concentration and behavior to school occupants. No level of RFR exposure has been conclusively determined to be safe.
- Thomas et al (2008) reported an increase in adult complaints of headaches and concentration difficulties with short-term cell phone use at 0.005 to 0.04 μ W/cm2 exposure levels.
- Heinrich et al (2010) reported that children and adolescents (8-17 years old) with short-term exposure to base-station level RFR experienced headache, irritation, and concentration difficulties in school. RFR levels were 0.003 $0.02~\mu W/cm2$.
- Thomas et al (2010) reported that RFR levels of 0.003 $0.02~\mu\text{W/cm}2$ resulted in conduct and behavioral problems in children and adolescents (8-17 years old) exposed to short-term cell phone radiation in school.
- Mohler et al (2010) reported that adults exposed to $0.005~\mu W/cm2$ cell phone radiation (base-station exposure levels) had sleep disturbances with chronic exposure, but this effect was not significantly increased across the entire population
- 8. For LAUSD to disregard existing health warnings from international science and public health experts by intentionally introducing technologies already shown to degrade learning environments would be reckless. It will create unnecessary liability for the District and will waste hundreds of thousands of dollars when wireless must eventually

be substituted out for wired alternatives. The LAUSD cannot afford to pay for wireless classrooms, only to have to replace them in short order with safer hard wired solutions that do not carry the burden of increased illness and District costs for health care and student remedial education.

- 9. Alternatives exist for internet connectivity that are not detrimental to learning environments and healthy classrooms.
- 10. A solid economic analysis is lacking to demonstrate that possible short-term economies of wireless are not, in the long run, far more expensive in relation to hard-wiring for internet connectivity. Such an economic analysis must consider all relevant costs for installation and maintenance; upgrades, health and safety costs, absentee losses, reduction in learning and increased special education needs; remediation costs, and the likely replacement of wireless for wired options as new public safety requirements must be met.
- 11. LAUSD should not accept positive assurances of safety from wireless technology providers who will claim that there is 'no proof' of harm. Proof of health harm is not and should not be required by the LAUSD Board in order to make a choice for safer education. A standard of evidence that requires 'proof of harm' from wireless technologies should be rejected by the LAUSD Board as a basis for deciding the question of whether to proceed with wireless classrooms.
- 12. There is more than sufficient evidence in hand today to show that wireless exposures for children, teachers, staff and the disabled over the long-term is inadvisable; and possible risk exists leading to health harm and learning impairments. Short- term effects on cognition, memory and learning, behavior, reaction time, attention and concentration, and altered brainwave activity (altered EEG) are also reported in the scientific literature (Sections 6 and 9, BioInitiative 2012 Report). EMF and RFR exposures cause bioeffects and adverse health effects consistent with those identified in children with autism spectrum disorders (ASDs) (Section 20, BioInitiative 2012 Report).
- 13. LAUSD should not encourage or mandate the use of wireless devices like iPads or wireless computers with associated wireless access points installed in classrooms; or cell phones in learning environments on LAUSD properties. There is evidence that is sufficient to warn against chronic use of wireless devices near or worn on the body

because of adverse effects on the testes, on male sperm quality and fertility, and tissues related to reproductive organs in both males and females (See Footnote 1).

14. In summary, LAUSD can achieve its educational goals by instituting new learning technologies for internet connectivity with hard-wired systems that do not create such preventable health risks. The goal of improving access to high-quality education and learning environments is best achieved by new infrastructure that is wired, not wireless. Any short-term economies that may seem attractive today with wireless technologies are likely to be dwarfed by long-term health costs, learning achievement deficiencies, absenteeism and the eventual need to replace wireless with wired technological systems.

Respectfully submitted this day of 12 February, 2013

Cindy Sage, MA, Sage Associates Co-Editor, BioInitiative 2012 Report Co-Editor, BioInitiative 2007 Report

Footnote 1 - Adverse effects are reported in more than 20 recent scientific studies on morphology and function of human male and female reproductive organs. Wireless devices that produce RFR exposure levels commonly associated with both 'in-use' and 'on stand-by' level 'normal usage' are associated with impairment of male reproductive organs (the testes), male hormone levels and sperm quality, motility and pathology. Wireless laptops and cell phones held close to the body are reported to negatively affect reproductive parameters in both human and animal studies (See Section 18 of the BioInitiative 2012 Report for references including Agarwal et al, 2008; Agarwal et al, 2009; Wdowiak et al, 2007; De Iuliis et al, 2009; Fejes et al, 2005; Aitken et al, 2005; Kumar, 2012). Other studies conclude that exposure to cell RFR such as phone radiation, or storage of a mobile phone close to the testes of human males affect sperm counts, motility, viability and structure (Aitken et al., 2004; Agarwal et al., 2007; Erogul et al., 2006). Animal studies have demonstrated oxidative and DNA damage, pathological changes in the testes of animals, decreased sperm mobility and viability, and other measures of deleterious damage to the male germ line (Dasdag et al, 1999; Yan et al, 2007; Otitoloju et al, 2010; Salama et al, 2008; Behari et al, 2006; Kumar et al, 2012).. Panagopoulous et al. 2012 reported decreased ovarian development and size of ovaries, and premature cell death of ovarian follicles and nurse cells in Drosophila melanogaster. Gul et al (2009) report rats exposed to stand-by level RFR (phones on but not transmitting calls) caused decrease in the number of ovarian follicles in pups born to these exposed dams. Magras and Xenos (1997) reported irreversible infertility in mice after five (5) generations of exposure to RFR at cell phone tower exposure levels of less than one microwatt per centimeter squared (µW/cm2)

References

Adey WR. Potential therapeutic applications of nonthermal electromagnetic fields: ensemble organization of cells in tissue as a factor in biological field sensing. In: Rosch PJ, Markov MS, editors. Bioelectromagnetic Medicine, 2004.

Aitken RJ, Koopman P, Lewis SEM. Seeds of concern. Nature 2004;432:48-52.

Aitken RJ, Bennetts LE, Sawyer D, Wiklendt AM, King BV. Impact of radio frequency electromagnetic radiation on DNA integrity in the male germline. Int J Androl. 2005; 28(3):171-179.

Aldad TS, Gan G, Gao XB, Taylor HS. Fetal radiofrequency radiation exposure from 800-1900 MHz-rated cellular telephones affects neurodevelopment and behavior in mice. Sci Rep. 2012;2:312.

Agarwal A, Deepinder F, Sharma RK, Ranga G, Li J. Effect of cell phone usage on semen analysis in men attending infertility clinic: an observational study. Fertil Steril. 2008; 89(1):124-128.

Agarwal A, Desai NR, Makker K, Varghese A, Mouradi R, Sabanegh E, Sharma R. Effects of radiofrequency electromagnetic waves (RF-EMW) from cellular phones on human ejaculated semen: an in vitro pilot study. Fertil Steril. 2009;92(4):318-1325.

Atasoy HI, Gunal MY, Atasoy P, Elgun S, Bugdayci G. Immunohistopathologic demonstration of deleterious effects on growing rat testes of radiofrequency waves emitted from conventional Wi-Fi devices. J Pediatr Urol. 2012 [Epub ahead of print].

Avendano C, Mata A, Sanchez Sarmiento CA, Doncei GF. Use of laptop computers connected to internet through Wi-Fi decreases human sperm motility and increases sperm DNA fragmentation. Fertil Steril. 2012;97(1):39-45. Epub 2011 Nov 23.Environmental Health 2012,11:42 http://www.ehjournal.net/content/11/1/42 Behari J, Kesari KK. Effects of microwave radiations on reproductive system of male rats. Embryo Talk 2006;1 (Suppl.1):81-5.

Baan R, Lauby-Secretan B, El Ghissassi F, Bouvard V, Benbrahim-Tallaa, Guha N, Islami F, Galiecht L, Straif K, on behalf of the WHO International Agency for Research on Cancer Monograph Working Group. Carcinogenicity of Radiofrequency Electromagnetic Fields. Lancet Oncology, Published on line June 22, 2011, DOI:10.1016/S1470- 2045(11)70147-4

Barouki R, Gluckmarn, PD, Grandjean P, Hanson M, Jeindel JJ. Developmental origins of non-communicable disease: Implications for research and public health.

Bellieni CV, Acampa M, Maffei M, Maffei S, Perrone S, Pinto I, Stacchini N, Buonocore G. Electromagnetic fields produced by incubators influence heart rate variability in newborns. Arch Dis Child Fetal Neonatal Ed. 2008;93(4):F298-301.

Bellieni CV, Pinto I, Bogi A, Zoppetti N, Andreuccetti D, Buonocore G. Exposure to electromagnetic fields from laptop use of "laptop" computers. Arch Environ Occup Health. 2012;67(1):31-36.

Bellieni CV, Tei M, Iacoponi F, Tataranno ML, Negro S, Proietti F, Longini M, Perrone S, Buonocore G. Is newborn melatonin production influenced by magnetic fields produced by incubators?, Early Hum Dev 2012;88(8):707-710

Belyaev IY, Alipov YD, Harms-Ringdahl M. Effects of zero magnetic field on the conformation of chromatin in human cells. Biochim Biophys Acta 1997;1336(3):465-473.

Belyaev I. BioInitiative 2012 Update, Section 15. Role of physical and biological variables in bioeffects of non-thermal microwaves for reproducibility, Cancer Risk Assessment and Safety Standards, 2012.

BioInitiative Working Group, Sage C, Carpenter DO, editors. BioInitiative Report: A Rationale for a Biologically-based Public Exposure Standard for Electromagnetic Fields (ELF and RF) at www.bioinitiative.org, August 31, 2007.

BioInititative Working Group, Sage C, Carpenter DO, editors. BioInitiative 2012 Report: A Rationale for Biologically-based Public Exposure Standards for Electromagnetic Radiation. December 31, 2012. www.bioinitiative.org

Blank M, Goodman R. DNA is a fractal antenna in electromagnetic fields. Int. J. Rad. Biol. Early On-Line, 2011. 1-7. DOI: 10.3109/09553002.2011.538130

Buchner K, Eger H. Changes of clinically important neurotransmitters under the influence of modulated RF fields—A long-term study under real-life conditions Umwelt-Medizin-Gesellschaft 2011;24(1):44-57. [Original study in German.]

Buzsaki G. Rhythms of the brain. Oxford Press, 2006;464 pp.

Carpenter DO Sage CL. 2008. Setting Prudent Public Health Policy for Electromagnetic Field Exposures. Reviews on Environmental Health 23(2) 91-117.

Carpenter DO. Electromagnetic fields and cancer: the cost of doing nothing. Reviews on Environmental Health 2010;25(1):75-80.

Czyz J, Guan K, Zeng Q, Nikolova T, Meister A, Schönborn F, Schuderer J, Kuster N, Wobus AN. High frequency electromagnetic fields (GSM signals) affect gene expression levels in tumor suppressor p53-deficient embryonic stem cells. Bioelectromagnetics 2004;25:296-307.

Dasdag S. Whole-body microwave exposure emitted by cellular phones and testicular function of rats. Urological Research 1999;27(3):219-223.

Davoudi M, Brossner C, Kuber W. The influence of electromagnetic waves on sperm motility. J Urol Urogynak 2002;29:19-22. De Iuliis GN, Newey RJ, King BV, Aitken RJ. Mobile phone radiation induces reactive oxygen species production and DNA damage in human spermatozoa in vitro. PLoS One 2009;4(7):e6446.

Divan HA. Kheifets L. Obel C. Olsen J. Prenatal and postnatal exposure to cell phone use and behavioral problems in children. Epidemiology 2008;19(4):523-529.

Erogul O, Oztas E, YildirimI, Kir T, Aydur E, Komesli G, Irkilata HC, Irmak MK, Peker AF. Effects of electromagnetic radiation from a cellular phone on human sperm motility: an in vitro study Arch Med Res 2006;37:840-843.

Falzone N, Huyser Cm, Becker P, Leszczynski D, Franken DR. The effect of pulsed 900-MHz GSM mobile phone radiation on the acrosome reaction, head morphometry and zona binding of human spermatozoa. Int J Androl 2011;34:20-26.

Fejes I, Zavaczki Z, Szollosi J, Koloszar S, Daru J, Kovacs L, Pal A. Is there a relationship between cell phone use and semen quality? Arch Androl 2005;51:385-393.

Fragopoulou AF, Koussoulakos SL, Margaritis LH. Cranial and postcranial skeletal variations induced in mouse embryos by mobile phone radiation. Pathophysiology. 2010;17(3):169-177.

Fragopoulou AF, Miltiadous P, Stamatakis A, Stylianopoulou F, Koussoulakos SL, Margaritis LH. Whole body exposure with GSM 900MHz affects spatial memory in mice. Pathophysiology. 2010;17(3):179-187.

Fragopoulou AF, Samara A, Antonelou MH, Xanthopoulou A, Papadopoulou A, Vougas K, Koutsogiannopoulou E, Anastasiadou E, Stravopodis DJ, Tsangaris GT, Margaritis LH. Brain proteome response following whole body exposure of mice to mobile phone or wireless DECT base radiation. Electromagn Biol Med. 2012 Jan 20. [Epub ahead of print]

Fejes I, Zavaczki Z, Szollosi J, Koloszar S, Daru J, Kovacs L. Is there a relationship between cell phone use and semen quality? Arch. Androl. 2005;51:385-393.

Gangi S, Johansson, O. A theoretical model based upon mast cells and histamine to explain the recently proclaimed sensitivity to electric and/or magnetic fields in humans. Med Hypotheses 2000;54:663-671.

Gee, D. Late Lessons from Early Warnings: Toward realism and precaution with EMF. Pathophysiology 2009;16(2,3):217-231.

Gul A, Celebi H, Uğraş S. The effects of microwave emitted by cellular phones on ovarian follicles in rats. Arch Gynecol Obstet. 2009;280(5):729-733,

Gutschi T Al-Ali MB Shamloul R Pummer K Trummer H. Impact of cell phone use on men's semen parameters. Andrologia 2011;43(5):312-316.

Hardell L Sage C. Biological effect from electromagnetic field exposure and public exposure standards. Biomedicine & Pharmacotherapy 2008;62:104-109. doi:10.1016/j.bipha.2007.12.004.

Hardell et al, BioInitiative Report Update, Section 11, Use of wireless phones and evidence for increased risk of brain tumors, 2012.

Heinrich S, Thomas S, Heumann C, von Kries R, Radon K. Association between exposure to radiofrequency electromagnetic fields assessed by dosimetry and acute symptoms in children and adolescents: a population based cross-sectional study. Environ Health 2010;9:75.

Hutter HP, Moshammer H, Wallner P. Kundi M. Subjective symptoms, sleeping problems, and cognitive performance in subjects living near mobile phone base stations, Occup. Environ. Med. 2006;63:307-313.

Interphone Study Group. Brain tumour risk in relation to mobile telephone use: results of the INTERPHONE international case-control study. International Journal of Epidemiology 2010;39(3):675-694.

Johansson A, Nordin S, Heiden M, Sandstrom M. Symptoms, personality traits, and stress in people with mobile phone-related symptoms and electromagnetic hypersensitivity. J. Psychosom Res. 2010;68(1):37-45.

Johansson O. Disturbance of the immune system by electromagnetic fields – a potentially underlying cause for cellular damage and tissue repair reduction which could lead to disease and impairment. Pathophysiology 2009;16(2,3):157-177.

Johansson O. Evidence for effects on the immune system – Section 8 in Sage C, Carpenter DO, editors. BioInitiative Working Group, BioInitiative Report: A Rationale for a Biologically-based Public Exposure Standard for Electromagnetic Fields (ELF and RF) at www.bioinitiative.org, August 31, 2007.

Juutilainen J Kumlin T Naarala J. 2006 Do extremely low frequency magnetic fields enhance the effects of environmental carcinogens? A meta-analysis of experimental studies. Ing J Radiat Biol 82: 1-12.

Kheifets L Repacholi M Saunders R et al. The sensitivity of children to electromagnetic fields. Pediatrics 2005:116, 303-313.

Kilgallon SJ, Simmons LW. Image content influences men's semen quality. Biol Lett 2005;1:253-255.

Kundi M. Hutter HP. Mobile phone base stations—Effects on wellbeing and health. Pathophysiology 2009;16:123-135.

Lai H. BioInitiative 2012 Report Update, Section 6, Genotoxicity, 2012.

Landgrebe M, Hauser S, Langguth B, Frick U, Hajak G, Eichhammer P. Altered cortical excitability in subjectively electrosensitivie patients: results of a pilot study. J. Psychsom Res 2007; 62(3):283-288.

Landgrebe M, Frick U, Hauser S, Langguth B Rosner R Hajak G, Eichhammer P. Cognitive and neurobiological alterations in electromagnetic hypersensitive patients: results of a case-control study. Psychol Med. 2008;38(12):1781-1791.

Ponomarev V, Sandström M, Mild KH, Medvedev S. EEG Synchronization in man under influence of the modulated illumination. Human Physiology, 1995;21:6;38-41.

Lyskov E, Ponomarev V, Sandström M, Mild KH, Medvedev S. Steady-state visual evoked potentials to computer monitor flicker. Int Journal of Psychophysiology, 1998;28:285-290.

Lyskov. E, Sandström, M. Hansson Mild K. Neurophysiological study of patients with perceived electrical sensitivity. Int J Psychophysiol 2001;42, 233-241.

Lyskov. E, Sandström, M. Hansson Mild K. Provocation study of persons with perceived electrical hypersensitivity and controls using magnetic field exposure and recording of electrophysiological characteristics. Bioelectromagnetics 2001;22:457-462.

Magras, IN, Zenos TD, RF Radiation-induced changes in the prenatal development of mice. Bioelectromagnetics 1997;18:455-461.

Marino A. Response to letter to the editor concerning 'Electromagnetic Hypersensitivity: Evidence for a Novel Neurological Syndrome." Int J Neurosci, Early On-line, 2012;1-2.

Markova E. Malmgren LOG. Belyaev IY. Microwaves from mobile phones inhibit 53PB1 focus formation in human stem cells stronger than in differentiated cells: Possible mechanistic link to cancer risk. Environmental Health Perspectives On-line 22 October 2009 doi:10.1289/ehp.0900781

Markova E, Malmgrem LOG, Belyaev IY. Microwaves from mobile phones inhibit 53PB1 focus formation in human stem cells stronger than in differentiated cells: possible mechanistic link to cancer risk. Environmental Health Perspectives 2010;118(3):394-399.

McCarty DE, Carrubba S, Chesson AL, Frilot C, Gonzalez-Toledo E, Marino AA.

Electromagnetic hypersensitivity: evidence for a novel neurological syndrome. Int J Neurosci 2011;121:670-676.

Milham S. Historical evidence that electrification caused the 20th century epidemic of "diseases of civilization". Med Hypotheses 2010;74(2):337-345.

Mohler E, Frei P, Braun-Fahrländer C, Fröhlich J, Neubauer G, Röösli M; Qualifex Team. Effects of everyday radiofrequency electromagnetic-field exposure on sleep quality: a cross-sectional study. Radiat Res 2010;174(3):347-356.

Oberfeld G, Enrique NA. Manuel P, Ceferino M. Gomez-Perrretta C. The Microwave Syndrome – Further Aspects of a Spanish Study. 3rd International Workshop on Biological Effects of Electromagnetic Fields. Kos, Greece, 2004.

Otitoloju AA, Obe IA, Adewale OA, Otubanjo OA, Osunkalu VO. Preliminary study on the induction of sperm head abnormalities in mice, Mus musculus, exposed to radiofrequency radiations from global system for mobile communication base stations. Bulletin of Environmental Contamination and Toxicology 2010;84(1):51-54.

Navarro EA, Sequra J, Portoles M, Gomez-Perretta de Mateo C. The Microwave Syndrome: a preliminary study in Spain. Electromag Biol Med 2003;122:161-169,

Panagopoulos DJ. Effect of microwave exposure on the ovarian development of Drosophila melanogaster. Cell Biochem Biophys. 2012;63(2):121-132,.

Presidents Cancer Panel. 2008-2009 Annual Report. Reducing Environmental Cancer Risk: What We Can Do Now, 2010. http://deainfo.nci.nih.gov/advisory/pcp/annualReports/pcp08-09rpt/PCP_Report_08 09 508.pdf

Preston RJ. Review: Children as a sensitive subpopulation for the risk assessment process. Toxicoloty and Applied Pharmacology 2004;199:132-141.

Sage C, Carpenter DO. Public health implications of wireless technologies. Pathophysiology 2009;16:233-246.

Sage C. Tragedy of the commons revisited: the high tech-high risk wireless world, Reviews on Environmental Health 2010;25(4):319-325.

Sage C, Huttunen P. Guest Editorial. WHO recognizes electromagnetic dangers: let us declare human health rights. Pathophysiology 2012;19:1-3.

Sage C Johansson O Sage SA. 2007. Personal digital assistant (PDA) cell phone units produce elevated extremely-low frequency electromagnetic field emissions. Bioelectromagnetics 28(5) 386-392.

Sage C Johansson O. 2007. Response to comment on "Measuring ELF fields produced by mobile phones and personal digital assistants (PDAs)". Bioelectromagnetics 28(7) 584-585.

Sage CL Sage SA. 2006. Briefing Report on Electromagnetic Fields: Health Effects, Public Policy and Site Planning. J.Aust. Coll.Nutr. & Env. Med. Vol.25, No. 2

Sage CL Sage SA. 2004. Epidemiology for Decision-makers: A Visual Guide to Residential and Occupational EMF Epidemiological Results on Leukemia 1979-2004. London Leukemia Conference, London, England, Children With Leukemia Registered Trust.

Sage C Sampson M. 1996. Epidemiology for Decision-makers: A Visual Guide to Residential and Occupational EMF Epidemiological Results, Bioelectromagnetics Society Abstract Annual Meeting, Victoria, Canada, 1996. Salama N, Kishimoto T, Kanayama HO. Effects of exposure to a mobile phone on testicular function and structure in adult rabbit. Int J Androl. 2010;33(1):88-94.

Sandström M, Lyskov E, Hansson Mild K. Neurophysiological effects of flickering light on patients with electrical hypersensitivity. In: Katajainen J, Knave B, eds, Electromagnetic Hypersensitivity. 2nd Copenhagen Conference, Denmark, May 1995.

Sandström M, Lyskov E, Hansson Mild K. Neurophysiological effects of flickering light on patients with electrical hypersensitivity. Proceeding at the Workshop on Project 244: Biomedical Effect of Electromagnetic Fields, Graz, Österrike 26-27 Sept 1994;88-93, XIII/72/95-EN.

Sandström M, Lyskov E, Berglund A, Medevedev S, Hansson Mild K. Neurophysiological effects of flickering light in patients with perceived electrical hypersensitivity. JOEM. 1997;39:15-22.

Sandstrom M, Lyskov E. Hornsten R, Hansson Mild K, Wiklund U, Rask P, Klucharev B, Bjerle P. Holter ECG monitoring in patients with perceived electrical hypersensitivity. Int J Psychophysiology 2003;49:227-235.

Schreier N, Huss A, Roosli M. The prevalence of symptoms attributed to eelctromagentic field exposure: a cross-sectional representative survey in Switzerland. Soz Preventiv Med 51: 202-209Seyle, H. (1953): Einführung in die Lehre von Adaptations-Syndrom, Thieme Verlag, Stuttgart, 2006.

Strogatz S. Human sleep and circadian rhythms: a simplemodel based on two coupled oscillators. J. Math. Biol 1987;25:327-347.

Strogatz S. Exploring complex networks. Review Article. Nature 2001;410(6825):268-76.

Strogatz S. Sync: The emerging science of spontaneous order. ISBN)-7868-6844-9. First Edition. Hyperion Books, New York, NY, 2003..

Sly JL, Carpenter DO. Special vulnerability of children to environmental exposures (in press) Rev Environ Health 27: 150-158:2012.

Thomas S, Kühnlein A, Heinrich S, Praml G, Nowak D, von Kries R, Radon K. Personal exposure to mobile phone frequencies and well-being in adults: a cross-sectional study based on dosimetry. Bioelectromagnetics 2008;29:463-470.

Thomas S, Heinrich S, von Kries R, Radon K. Exposure to radio-frequency electromagnetic fields and behavioural problems in Bavarian children and adolescents. Eur J Epidemiol 2010;25(2):135-141.

TNO Physics and Electronics Laboratory, The Netherlands. Effects of Global Communication System radio-frequency fields on well-being and cognitive functions of human beings with andwithoutsubjectivecomplaints.

NetherlandsOrganizationforAppliedScientificResearch 2003;1-63.

Tuengler A, von Klitzing L. Mobile phones, electromagnetic hypersensitivity and the precautionary principle. Electromagnetic Biology and Medicine, 2012;1-10. DOI:10.3109/15368373.2012.712856

US Government Accountability Office, 2012. Telecommunications: Exposure and Testing Requirements for Mobile Phones Should Be Reassessed. GAO - 12 - 771.

Volkow ND, Tomasi D, Wang GJ, Fowler JS, Telang F, Wang R, Alexoff D, Logan J, Wong C, Pradhan K, Caparelli EC, Ma Y, Jayne M. Effects of low-field magnetic stimulation on brain glucose metabolism. Neuroimage. 2010;51(2):623-628.

Volkow ND, Tomasi D, Wang GJ, Fowler JS, Telang F, Wang R, Alexoff D, Logan J,

Wong C₂. Effects of cell phone radiofrequency signal exposure on brain glucose metabolism. JAMA. 2012;305(8):808-813.

WHO. Children's health and environment: A review of evidence. A joint report from the European Environment Agency and World Health Organization, 2002. http://www.who.int/peh-emf

WHO. Extremely Low Frequency Fields Environmental Health Criteria Monograph 238, 2007. www.who.int/peh-emf/project/en and http://www.who.int/peh-emf/meetings/elf emf workshop 2007/en/index.html

Wdowiak A, Wdowiak L, Wiktor H. Evaluation of the effect of using mobile phones on male fertility. Ann Agric Environ Med 2007;14:69-172.

Wiart J Hadjem A Wong MF et al. Analysis of RF exposure in the head tissues of children and adults. Phys Med Biol 2008:5:3681-95.

Yan JG, Agresti M, Bruce T, Yan YH, Granlund A, Matloub HS. Effects of cellular phone emissions on sperm motility in rats. Fertility and Sterility 2007;88(4):957-964.

Recent Publications for Cindy Sage

BioInitiative Working Group, Cindy Sage and David O. Carpenter, Editors. BioInitiative Report: A Rationale for Biologically-based Public Exposure Standards for Electromagnetic Radiation at www.bioinitiative.org, December 31, 2012.

Herbert M Sage C (2012) Findings in Autism (ASD) Consistent with Electromagnetic Fields (EMF) and Radiofrequency Radiation (RFR) in BioInitiative Working Group, Cindy Sage and David O. Carpenter, Editors. BioInitiative Report: A Rationale for Biologically-based Public Exposure Standards for Electromagnetic Radiation at www.bioinitiative.org, December 31, 2012.

Sage C Carpenter DO. (2012). Key Scientific Evidence and Public Health Policy Recommendations in BioInitiative Working Group, Cindy Sage and David O. Carpenter, Editors. BioInitiative Report: A Rationale for Biologically-based Public Exposure Standards for Electromagnetic Radiation at www.bioinitiative.org, December 31, 2012.

Sage C. (2012) The similar effects of low-dose ionizing radiation and non-ionizing radiation from background environmental levels of exposure. Special Issue: Impact of Physical Factors on Biosphere Guest Editor: Marko S. Markov, The Environmentalist Volume 32 · Number 2 · June 2012

Sage, C. (2102) Guest Editorial. *WHO recognizes electromagnetic dangers: let us declare human health rights*. Pathophysiology 19 (2012) 1–3

Sage, C. Assessment of Radiofrequency Microwave Radiation Emissions from Smart Meters. Sage Reports.Com Science for Decision-Makers and the Public. Sage Associates. January 1, 2011. Posted January 1, 2011 at http://sagereports.com/smart-meter-rf

Sage, C (2011) An assessment of the EPRI technical report *An Investigation of Radiofrequency Fields Associated with the Itron Smart Meter, Richard Tell Associates, Inc. December*, 2010. Sage Reports.Com Science for Decision-Makers and the Public. Posted November, 2011 at http://sagereports.com/smart-meter-rf/?page_id=474

Sage, C. (2011) EPRI Comment: Sage Report on Radio-Frequency (RF) Exposures from Smart Meters, February, 2011. Sage Associates Response posted February 14, 2011 at http://sagereports.com/smart-meter-rf/?page_id=460

Fragopoulou A, Grigoriev Y, Johansson O, Margaritis LH, Morgan L, Richter E, Sage C. "Scientific panel on electromagnetic field health risks: Consensus points, recommendations, and rationales. Scientific Meeting: Seletun, Norway, November 17-21, 2009", Rev Environ Health 2010; 25: 307-317.

Sage, C. 2010. Tragedy of the commons revisited: the new wireless commons. Reviews on Environmental Health Vol 25 (4) 319-325. Walter de Gruyter, Berlin, New York.

Sage C. Carpenter DO. 2009. Public Health Implications of Wireless Technologies. Pathophysiology 16 (2009) 233–246

Hardell L Sage C. Biological effect from electromagnetic field exposure and public exposure standards. Biomedicine & Pharmacotherapy 2008;62:104-109. doi:10.1016/j.bipha.2007.12.004.

BioInitiative Working Group, Cindy Sage and David O. Carpenter, Editors. BioInitiative Report: A Rationale for a Biologically-based Public Exposure Standard for Electromagnetic Fields (ELF and RF) at www.bioinitiative.org, August 31, 2007.

Carpenter DO Sage CL. 2008. Setting Prudent Public Health Policy for Electromagnetic Field Exposures. Reviews on Environmental Health 23(2) 91-117.

Sage C Johansson O Sage SA. 2007. Personal digital assistant (PDA) cell phone units produce elevated extremely-low frequency electromagnetic field emissions. Bioelectromagnetics 28(5) 386-392.