

# EMF AND HEALTH: SCIENTIFIC UPDATE

Paolo Vecchia  
*Chairman of ICNIRP*

---

IRPA13  
Glasgow, UK, 13-18 May 2012



# REVISION OF ICNIRP STANDARDS

Review of the science  
(ICNIRP)

Evaluation of carcinogenicity  
(IARC)

Global risk evaluation  
(WHO)

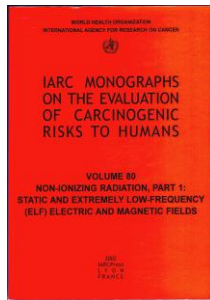
Update of standards  
(ICNIRP)

---

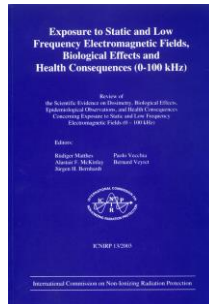
IRPA13  
Glasgow, UK, 13-18 May 2012



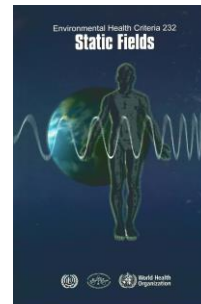
# STATIC FIELDS



IARC 2002



ICNIRP 2003

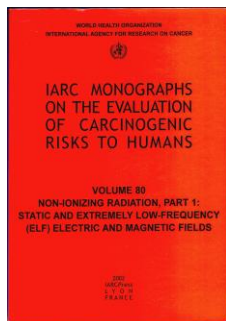


WHO 2006



ICNIRP 2009

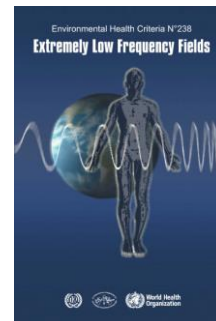
# ELF FIELDS



IARC 2002



ICNIRP 2003

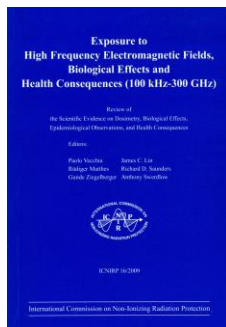


WHO 2007

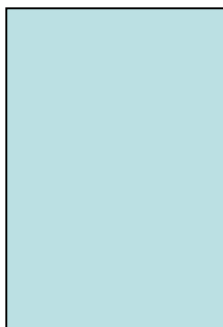


ICNIRP 2010

# RF FIELDS



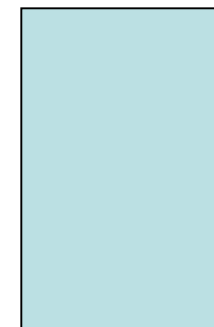
ICNIRP 2009



IARC 2012



WHO 2013



ICNIRP 2013 (?)

IRPA13  
Glasgow, UK, 13-18 May 2012

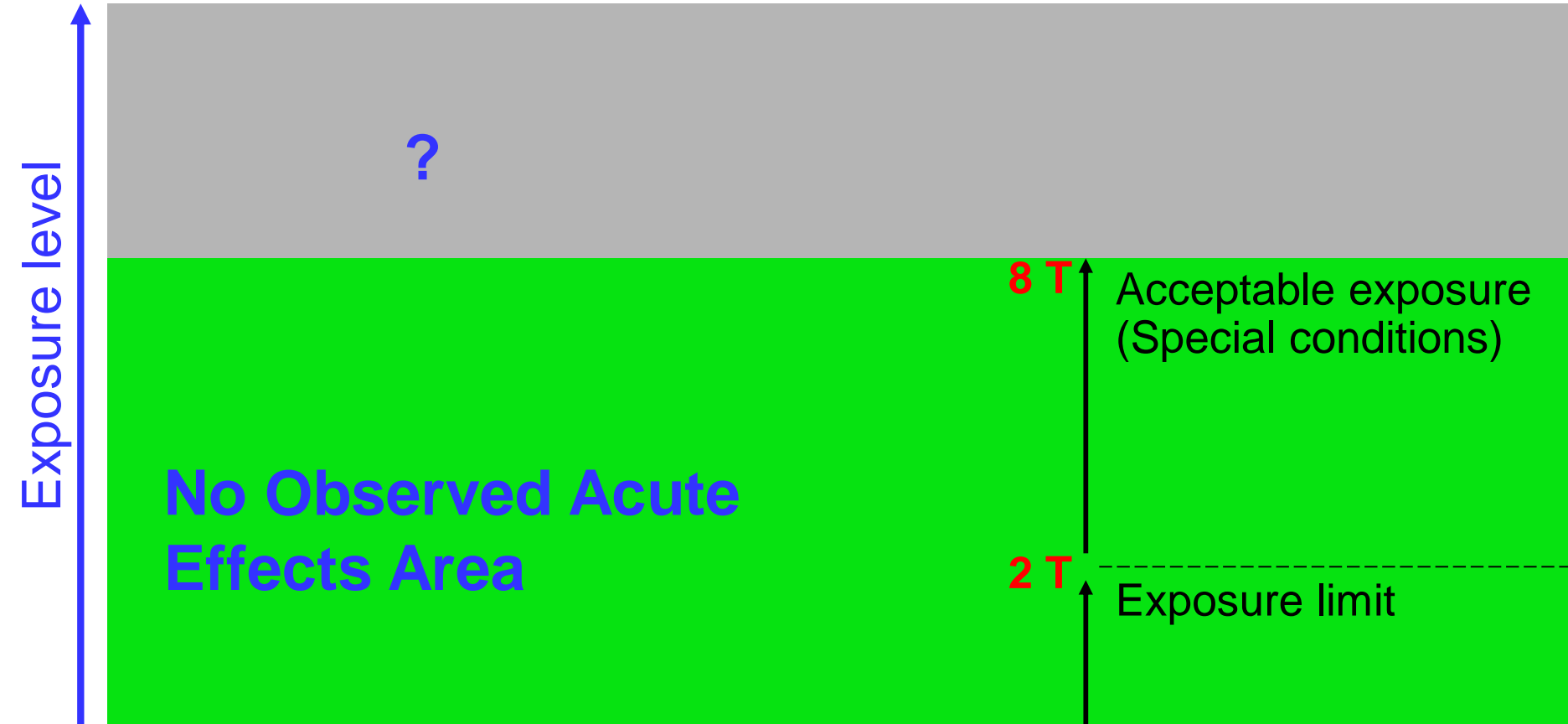


# STATIC MAGNETIC FIELDS

- Biological effects theoretically predicted: orientation of macromolecules, charge polarization (Hall effect), magneto-hydrodynamic forces
- **No evidence of health effects** up to the maximum attainable exposure levels
- Theoretically predicted threshold levels higher than field strengths presently attainable ( $\approx 8$  T)
- Some disturbances (phosphenes, vertigo, nausea) reported by some individuals above 2 T

**Protection system based on the maximum no-observable acute effect level (NOAEL)**

# STATIC MAGNETIC FIELDS ("NOAEL" APPROACH)

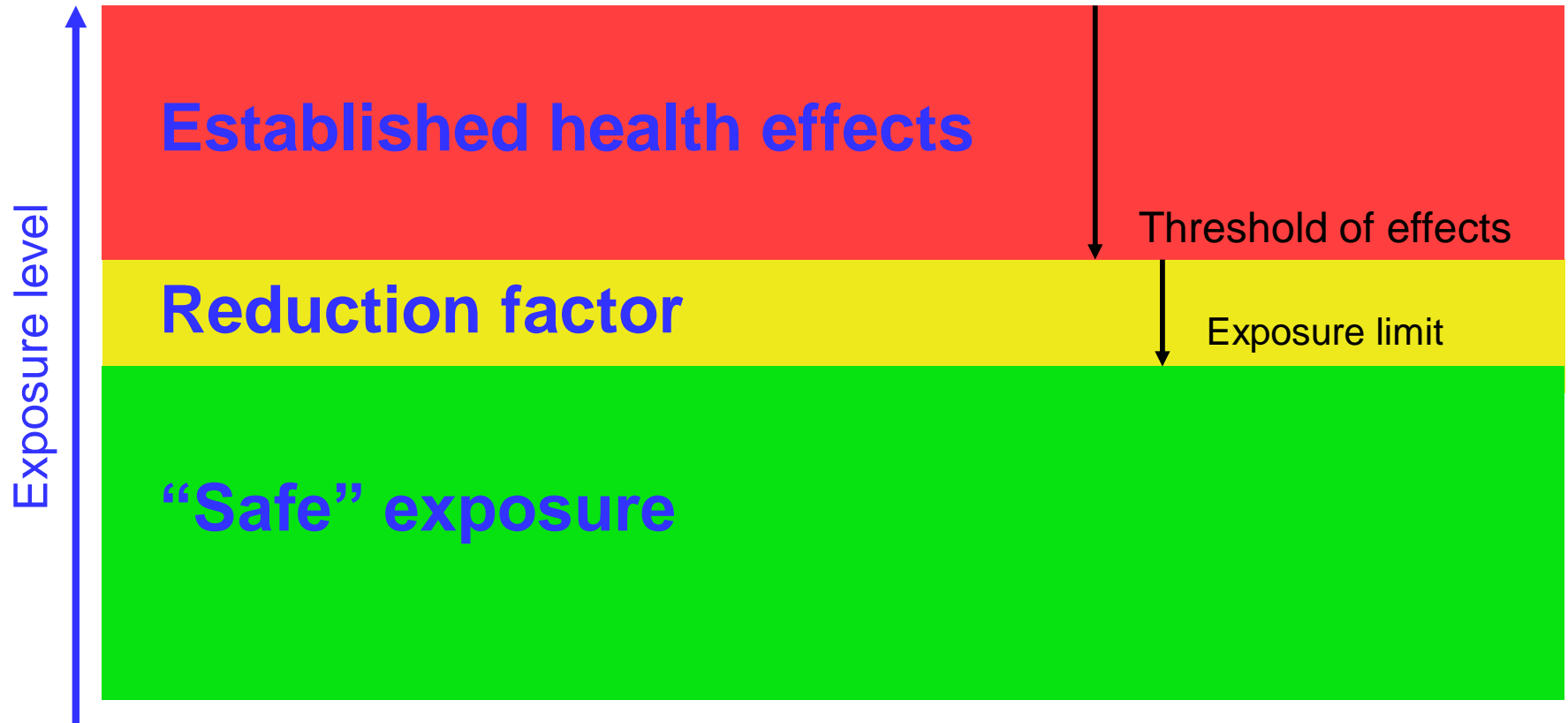


# TIME-VARYING ELECTROMAGNETIC FIELDS

- Acute effects established since a long time
- Mechanisms and thresholds clearly identified
- Effects and thresholds confirmed by most recent studies

Threshold-based protection system confirmed

# TIME-VARYING ELECTROMAGNETIC FIELDS (THRESHOLD-BASED APPROACH)

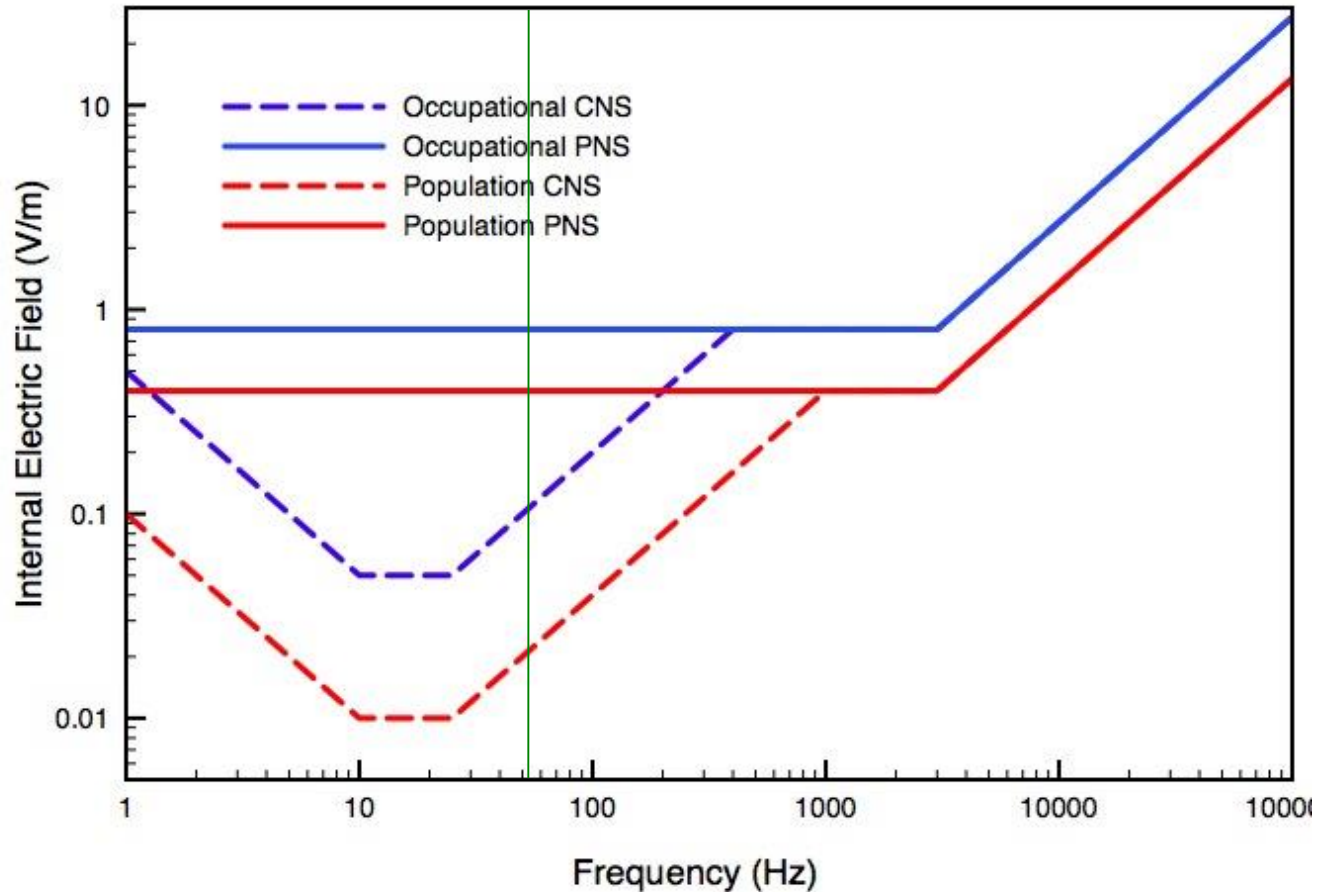


# LOW-FREQUENCY ELECTRIC AND MAGNETIC FIELDS (1 Hz – 100 kHz)

- Health effects due to **stimulation of electrically excitable tissues** (nerves and muscles)
- Advances in numerical dosimetry
- Improved knowledge of frequency dependence of thresholds
- Disturbances (phosphenes) reported below the thresholds for health effects at extremely low frequencies (around 20 Hz)
- Consideration of phosphenes in the revision of guidelines (with possible relaxation)



# LF - BASIC RESTRICTIONS



# HIGH-FREQUENCY ELECTROMAGNETIC FIELDS (100 kHz – 300 GHz)

- Health effects due to **absorption of electromagnetic energy** (thermal effects)
- Substantial advances in dosimetry
- Some indications of non-thermal effects below basic restrictions. Replication needed. Health consequences unclear

# LONG-TERM EFFECTS LOW-FREQUENCY FIELDS

- ELF magnetic fields classified by IARC as “possibly carcinogenic” (Group 2B) in 2002
- Classification based on limited evidence in humans (epidemiology) and inadequate evidence in animals

# UPDATE OF EPIDEMIOLOGY

Our results are **in line with previous pooled analyses showing an association** between magnetic fields and childhood leukaemia. Overall, the association is weaker in the most recently conducted studies, but these studies are small and lack methodological improvements needed to resolve the apparent association.

We conclude that recent studies on magnetic fields and childhood leukaemia **do not alter the previous assessment that ELF magnetic fields are possibly carcinogenic.**

*L. Kheifets et al. Pooled analysis of recent studies on magnetic fields and childhood leukaemia. B. J. Cancer, 2011*

# ICNIRP ON LONG-TERM EFFECTS

A causal relationship between magnetic fields and childhood leukemia has not been established nor have any other long term effects been established.

The absence of established causality means that this effect cannot be addressed in the basic restrictions.

*ICNIRP Guidelines, 2010*

# LONG-TERM EFFECTS HIGH-FREQUENCY FIELDS

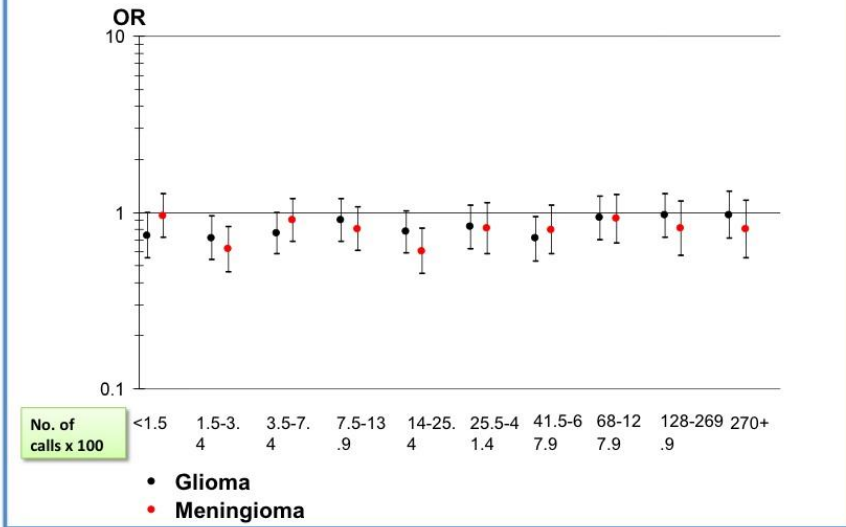
- RF electromagnetic fields classified by IARC as “possibly carcinogenic” (Group 2B) in 2011.
- Classification based on limited evidence in humans (epidemiology) and limited evidence in animals.
- Evaluation mostly based on studies on mobile phone use
- Publication of the monograph expected mid-2012

# MOBILE PHONE EPIDEMIOLOGY

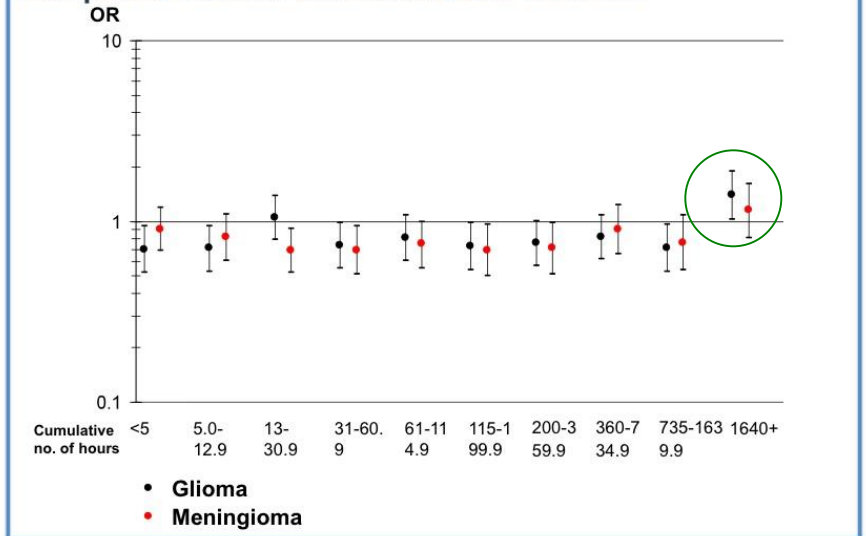
- Danish cohort study negative
- Increase of brain tumours reported by one research group (Hardell et al, Sweden)
- INTERPHONE case-control study mostly negative (some partial findings debated)

# THE INTERPHONE STUDY

Amount of use Interphone: Cumulative number of calls



Interphone results: Cumulative call duration





# ICNIRP ON THE INTERPHONE STUDY (2010)

INTERNATIONAL COMMISSION ON NON-IONIZING RADIATION PROTECTION



## NOTE

NOTE FROM THE INTERNATIONAL COMMISSION ON NON-IONIZING RADIATION PROTECTION  
(ICNIRP) ON THE INTERPHONE PUBLICATION\*  
Munich, 18.05.2010

[www.icnirp.org](http://www.icnirp.org)

ICNIRP believes on preliminary review of the results that they **do not change the overall conclusions**

ICNIRP therefore concludes that the results of the Interphone study give no reason for alteration of the present guidelines.

---

IRPA13  
Glasgow, UK, 13-18 May 2012



# ICNIRP ON LONG-TERM EFFECTS (2011)

[The Interphone data] combined with the results of biological and animal studies, other epidemiological studies, and brain tumour incidence trends, suggest that within the first 10-15 years after first mobile phone use there is unlikely to be a material risk of adult brain tumours resulting from mobile phone use.

*ICNIRP - SC I. Mobile Phones, Brain Tumours, and the Interphone Study: Where Are We Now?  
Environ Health Perspect 2011*

---

IRPA13

Glasgow, UK, 13-18 May 2012



**THANK YOU  
FOR YOUR ATTENTION**

---

**IRPA13**  
*Glasgow, UK, 13-18 May 2012*

