

Strengthened Scientific Circumstances further increase necessity for the City's Right-to-Know Ordinance and Justify a Major Public Health Education Campaign on Cell Phone Safety

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Dear Honorable San Francisco Board of Supervisors:

Norman Yee
John Avalos
Malia Cohen
London Breed
Eric Mar
David Chiu
David Campos
Katy Tang
Jane Kim
Mark Farrell
Scott Wiener

We commend the Board in having passed the right to know ordinance about cell phones in 2010. Recent scientific research conducted since then affirms the wisdom of the right to know ordinance. Therefore, in the interest of the public health of the citizens of San Francisco please consider all of the new recently published scientific information (discussed below), **we urge you to vote against the proposed settlement of the lawsuit filed by the CTIA-The Wireless Association[®]** against the City and County of San Francisco (United States District Court, Northern District of California, Case No. 3:10-cv-03224 (WHA); entitled CTIA - The Wireless Association v. City and County of San Francisco) and continue the litigation in support of the Cell Phone Right-to-Know Law. In particular, please do not authorize any permanent injunction against enforcement of the Cell Phone Right-to-Know Law that was unanimously passed by the SF Board of Supervisors.

Just one week ago, on April 24th the **International Agency for Research on Cancer (IARC) of the World Health Organization issued its Monograph¹ that addresses whether cellular telephone RF EMF radiation presents a risk of cancer to the cell phone users. The IARC re-affirmed its official classification that cellular telephone radiation is a Group 2B carcinogen** along with automobile exhaust and other toxic substances including DDT, heptachlor, styrene and hexachlorobenzene and they now released their 480 page Monograph that provides the details of the basis on the classification in this the **most significant government health report on mobile phone radiation ever published.**

The fact that IARC drew this conclusion is particularly important because IARC has a reputation for being extremely difficult to convince before concluding that anything is a carcinogen. The new WHO IARC Monograph concludes that:

¹ IARC Monograph Non-ionizing Radiation, Part 2: Radiofrequency Electromagnetic Fields volume 102 <http://monographs.iarc.fr/ENG/Monographs/vol102/index.php>

“Due to the closer proximity of the phone to the brain of children compared with adults, the average exposure from use of the same mobile phone is higher by a factor of 2 in a child’s brain and higher by a factor of 10 in the bone marrow of the skull.”² (p. 408)

“Positive associations have been observed between exposure to radiofrequency radiation from wireless phones and glioma and acoustic neuroma”³ (p.421),

“Radiofrequency electromagnetic fields are possibly carcinogenic to humans (Group 2B).”⁴

This significant announcement by the cancer experts at WHO accompanies among other peer-reviewed research that has found deleterious, non-thermal effects on the brain and other parts of the body, including sperm damage including reducing sperm motility, and causing deformation in surviving spermatozoa.

This WHO conclusion comes on the heels of many other recent sources to the same effect. For example, your attention is respectfully directed to the following new science that must be carefully reviewed and weighed in protecting the people of SF:

1. In October, 2012, the Italian Supreme Court ruled the Insurance Body for Work (INAIL) must compensate a worker who developed a tumor in the head due to long-term, heavy use of mobile phones on the job. Importantly, the ruling underscored discrepancies between the low evidence of risk found by industry-funded studies and the higher evidence of risk found by independent studies⁵.
2. The Spanish Labor Court in Madrid ruled ‘permanent incapacitation’ of a college professor who suffered from chronic fatigue and environmental and electromagnetic hypersensitivity⁶.
3. A March 2012 study from the Keck School of Medicine, University of Southern California found that statistically significant annual increases in frontal and temporal lobe grade IV brain cancers (glioblastoma multiforme) from 1992 to 2006⁷.
4. Another study published by IARC in 2011 reported that the brain’s frontal and temporal lobe absorbs 69-72% of the total cellphone radiation absorbed by the brain depending on the carrier frequency of the cellphone⁸.

² *Ibid*

³ *Ibid*

⁴ *Ibid*

⁵ ICEMS Position Paper on the Cerebral Tumor Court Case, by Livio Giuliani, ICEMS Scientific Secretariat and Spokesman, Morando Soffritti, ICEMS Steering Committee Chairman, <http://www.icems.eu/>
<http://www.radiationresearch.org/images/documents/icems%20position%20paper1.pdf>

⁶ <http://www.noticiasmedicas.es/medicina/noticias/10451/1/La-hipersensibilidad-a-las-ondas-que-producen-los-telefonos-moviles-se-convierte-en-una-nueva-causa-de-incapacidad-permanente/Page1.html> and English translation <http://electromagnetichealth.org/electromagnetic-health-blog/labor-court-spain/>

⁷ Zada G et al, (March 2012) Incidence trends in the anatomic location of primary malignant brain tumors in the United States: 1992-2006, World Neurosurg. 2012 Mar;77(3-4):518-24.

⁸ Analysis of three-dimensional SAR distributions emitted by mobile phones in an epidemiological perspective, Bioelectromagnetics. 2011 Dec;32(8):634-43.

5. On July 12, 2012, the American Academy of Pediatrics sent a letter to the Federal Communication Commission (FCC) urging that the FCC to open a “formal inquiry into radiation standards for cell phones and other wireless products” adding “The FCC has not assessed the standard for cell phone radiation since 1996.”⁹
6. On March 29, 2013, the FCC issued a proposal to review its safety rules on cell phones based on new scientific findings in a Notice of Inquiry (NOI)¹⁰.
7. The CTIA released its 2012 year-end survey on May 2nd 2013 reporting that there are now more wireless subscriber connections (326.4 million) in the U.S. than people, and more than 300,000 cell tower sites¹¹.

The City and County of San Francisco takes the health of its residents seriously. This is clear from the history of the SF Environment Code, particularly Section 100, **mandating** that the precautionary approach shall be used in making all decisions **affecting the health of our residents** including careful assessment of all available alternatives using the best available science and Section 101 where it articulates that its decisions shall protect against threats of **serious or irreversible damage to its people regardless of full scientific certainty about cause and effect**. *Applicable Code therefore, in the light of these new WHO findings, requires that the City take action to protect its residents from commercial cellular device side effects, by providing notice sufficient to reasonably encourage safe use.*

The City of San Francisco, faces potential major liability costs in the millions of dollars for employees that may be diagnosed with a brain tumor that use cell phones as part of their work. A new peer-reviewed paper (see attached) by Devra Davis, Environmental Health Trust, Santos Kesari from the University of California San Diego, Division of Neuro-Oncology and other experts (which was hand-delivered to the Rules Committee of the Board of Supervisors on April 17, 2013) reports medical cost data estimates

“...treatment for a single case of brain cancer can cost between \$100,000 for radiation therapy alone and up to \$1 million depending on drug costs, resources to address this illness are already in short supply and not universally available in either developing or developed countries.”¹²

It is relevant to note that on February 26, 2013, Verizon Communications Inc reported the following liability risk in its Annual Report to the US Securities and Exchange Commission (US SEC)¹³,

“...our wireless business also faces personal injury and consumer class action lawsuits relating to alleged health effects of wireless phones or radio frequency transmitters, and class action lawsuits that challenge marketing practices and disclosures relating to alleged adverse health effects of

⁹ <http://www.scribd.com/doc/104230961/American-Academy-of-Pediatrics-letter-to-the-FCC>

¹⁰ FCC Review of RF Exposure Policies, REPORT AND ORDER FURTHER NOTICE OF PROPOSED RULE MAKING AND NOTICE OF INQUIRY, <http://www.fcc.gov/document/fcc-review-rf-exposure-policies>

¹¹ http://files.ctia.org/pdf/CTIA_Survey_YE_2012_Graphics-FINAL.pdf

¹² Pathophysiology, pre-release with special permission from the publisher, <http://dx.doi.org/10.1016/j.pathophys.2013.03.001>

¹³ <http://www.sec.gov/Archives/edgar/data/732712/000119312513075713/d441535d10k.htm>

handheld wireless phones. We may incur significant expenses in defending these lawsuits. In addition, we may be required to pay significant awards or settlements.”

In light of these materially changed circumstances, towards the goal of saving lives in San Francisco, we urge that the Board continue to ensure the public right to know about cell phone safety and assist in promoting broad public understanding of basic precautions that can be taken to reduce radiation exposure from cell phones. People have a right to know about ways to use phones more safely that are currently embedded within phones or in printed in small type in pamphlets they receive after purchasing these devices. We applaud your efforts to promote this basic right.

Very truly yours,

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Erik Peper, PhD: Professor; Director of Business Development; Advisor International Olympic Committee; San Francisco State University (SFSU).

Devra Lee Davis, PhD, MPH: Founder and President Environmental Health Trust; Presidential Appointee.

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Prof. Dr. Süleyman Kaplan: JECM Editor; President of Turkish Society for Stereology; Director of Health Sciences Institute, Ondokuz Mayıs University; Head of Department of Histology and Embryology, Ondokuz Mayıs University, Samsun, Turkey.

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