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To whom it may concern,

**I urge in the strongest terms that you vigorously oppose California SB 649.**

**If this bill passes, many people will suffer greatly, and needlessly, as a direct result.**

**This sounds like hyperbole. It is not.**

My research group at UC San Diego alone has received hundreds of communications from people who have developed serious health problems from electromagnetic radiation, following introduction of new technologies. Others with whom I am in communication, have independently received hundreds of similar reports. Most likely these are a tip of an iceberg of tens or perhaps hundreds of thousands of affected persons. As each new technology leading to further exposure to electromagnetic radiation is introduced – and particularly introduced in a fashion that prevents vulnerable individuals from avoiding it – a new group becomes sensitized to health effects. This is particularly true for pulsed signals in the radiowave and microwave portion of the spectrum, the type for which the proposed bill SB 649 will bypass local control.

**Mechanisms by which health effects are exerted** have been shown to include oxidative stress (the type of injury against which antioxidants protect, see optional section below), damage to mitochondria (the energy producing parts of cells), damage to cell membranes<sup>1, 21</sup>, and via these mechanisms, an impaired “blood brain barrier”<sup>3-5</sup> (the blood brain barrier defends the brain against introduction of foreign substances and toxins; additionally, disruption can lead to brain edema<sup>6</sup>), constriction of blood vessels and impaired blood flow to the brain<sup>7</sup>, and triggering of autoimmune reactions<sup>8, 9</sup>. Following a large exposure, that depresses antioxidant defenses, magnifying vulnerability to future exposures, some persons no longer tolerate many other forms and intensities of electromagnetic radiation that previously caused them no problem, and that currently cause others no problem. But this group deserves – nay needs -- the right to be able to avoid these exposures.

**Affected individuals not only experience “symptoms”** that “merely” cause them distress and suffering, when they are exposed – symptoms like headaches<sup>10, 11</sup>, ringing ears<sup>10, 11</sup> and chest pain<sup>10</sup> from impaired blood flow, heart rhythm abnormalities<sup>10, 11</sup>, and inability to sleep<sup>10, 11</sup>. These symptoms arise from physiological injury. Moreover, **many experience significant health problems that can include seizures<sup>11</sup>, heart failure, hearing loss<sup>12-14</sup> and severe cognitive impairment<sup>11, 15</sup>.** The mechanisms



involved are those also involved in development and progression of neurodegenerative conditions including Alzheimer's disease<sup>16</sup>.

**Fully half who were employed when their problems developed lost their job because of the problem**, among participants of a survey we conducted. They reported that their condition had cost them up to 2 million dollars to date. Many had lost their homes. A number became homeless, and have swelled the ranks of so-called "EMF refugees"<sup>17-19</sup>. Many were previously high functioning individuals – engineers, doctors, and lawyers. The best and the brightest are among those whose lives – and ability to contribute to society – will be destroyed. High profile individuals with acknowledged electrohypersensitivity include, for instance, Gro Harlem Brundtland – the former 3-time Prime Minister of Norway and former Director General of the World Health Organization<sup>20</sup>; Matti Niemela, former Nokia Technology chief<sup>21</sup>; as well as the wife of Frank Clegg<sup>22</sup>, who formerly headed Microsoft Canada and is current head of Canadians for Safe Technology<sup>23</sup>.

**Each new roll-out of electromagnetic technology for which exposure is obligatory, swells the ranks of those who develop problems with electromagnetic fields (EMF).**- particularly following a significant exposure to pulsed radiowave-microwave radiation, and particularly when people have no ability to avoid it.

**Many state that they didn't give credence to the problem** (if they had heard of it at all) **until they themselves fell prey to it.**

**This is not a psychologically driven condition.** Multiple objective physiological changes reflecting mechanisms of injury have been shown in persons with this condition<sup>24, 25</sup>.

**The role for oxidative stress, that has been shown in innumerable studies** (below), **is affirmed by evidence of a link of this condition to genetic variants in antioxidant defenses**, that are less avid in defending against oxidative stress<sup>307</sup>. People cannot manipulate their genes, to produce such an outcome by suggestibility.

**An analysis by a University of Washington researcher showed that most studies funded by industry reported failure to show physiological effects. However, most studies without such industry bias affirmed effects.** This is redolent of findings shown in medicine<sup>26</sup>, regarding which the former editor in chief of the BMJ (the British Medical Journal), Richard Smith, noted, based on findings of a study, "This {result} suggests that, far from conflict of interest being unimportant in the objective and pure world of science where method and the quality of data is everything, it is the main factor determining the result of studies."<sup>27</sup>. So where articles deny injury from nonionizing radiowave-microwave radiation, there is commonly a stake aligned with financial benefit from such denial.



**Those who are affected are in desperate need of *protection* by our elected officials.** They need creation of safe spaces and housing, and roadways to allow travel, not removal of any prospect of one; protection of local rights to make decisions - **not removal of any recourse or ability to avoid what injures them.** They are far more strongly in need of protections than a great many protected classes – their problems arose due to actions of others, against which they were given no control – *and can be reversed*, in most cases, if the assault on them is rolled back. Through no fault of their own, and in some cases against their will (e.g. before opt out was permitted with smart meters), they were subjected to an exposure that has altered their lives as they knew them, and forced them – needlessly - to the margins of society.

**Let our focus be on safer, wired and well shielded technology – not more wireless.**

**This legislation, if passed, and the resulting unrestricted roll-out of this technology, will predictably and directly injure and disable a new group,** and add depth of suffering to those already affected.

**In other spheres we abridge freedoms to protect the vulnerable few.** We require that every schoolchild be vaccinated, supposedly to protect the vulnerable few who may not respond effectively to a vaccine. The need to protect the vulnerable group is deemed to be so great that it justifies the decision to abridge individual rights.

**In contrast, this bill seeks to abridge individual freedoms, and local rights, in the service of *harming a vulnerable group, and creating a new one.***

(The common factor appears to be that in both cases, the direction is aligned with a powerful industry that influences political decisions.)

Luckily, no abridgment of individual rights and freedoms is required to protect, here.

**If any group can opt out** (such as, I understand, firefighters\*)<sup>28</sup>; **then *every* group deserves that equal right.** Others should not be second class citizens, subject to fewer protections.

It would go far to helping this cause if anyone complicit in promoting or passing the legislation (and then after that, *their* families) were required to be the first subjected, for a substantial test period, to the *greatest* amount of exposure that anyone *else* (and their families) may be subjected to, when new policies of this type are rolled out. It will still not do them equal damage; because they may not represent the vulnerabilities that others will have; but such a policy might help them to think twice. *That* is a bill I would strongly endorse.

**Most who are now affected – were not, until they were. This may become you – or your child or grandchild.** Moreover, if you have a child, or a grandchild, his sperm, or her eggs (all of which she will



already have by the time she is a fetus in utero), will be affected by the oxidative stress damage created by the electromagnetic radiation, in a fashion that may affect your future generations irreparably.

It was noted above that, among survey completers, fully half of those who were employed at the time they developed electrosensitivity, lost employment *due to* this problem. (This may understate the scope of the tragedy, since this most-affected group may be least likely to be able to respond to an online survey.) **Many who previously had no problem navigating in the world are now restricted from access to basic services** like hospital care, post offices and libraries because of these problems. With each new introduction of technology that exposes many to yet a new nondiscretionary source of electromagnetic radiation, particularly (but not exclusively) that which emits pulsed radiation in the radiowave-microwave part of the spectrum, a new group of people are affected; and the suffering of those who are already affected increases greatly.

Please, defend the public and our future. Protect the rights of the individual and the locality, against a form of incursion that will lead to serious harm to some – and set a terrible precedent. **Vote no on California SB 649**, and urge that everyone else do the same.

Sincerely,

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\*Comment on the fire fighter exemption: “The legislature granted an exemption from SB 649 to the firefighters who requested it for health reasons. Throughout California firefighters have long complained of often disabling symptoms from cell towers on their stations. Cities frequently rent out space on fire stations to add to city revenue. . . .Symptoms experienced by the firefighters have included neurological impairment including severe headache, confusion, inability to focus, lethargy, inability to sleep, and inability to wake up for 911 emergency calls. Firefighters have reported getting lost on 911 calls in the same community they grew up in, and one veteran medic forgot where he was in the midst of basic CPR on a cardiac victim and couldn’t recall how to start the procedure over again. . . .Prior to the installation of the tower on his station, this medic had not made a single mistake in 20 years. A pilot study (2004) of California firefighters showed brain abnormalities, cognitive impairment, delayed reaction time, and lack of impulse control in all 6 firefighters tested (<https://ecfsapi.fcc.gov/file/7022117660.pdf>). This study led to the overwhelming passage of Resolution 15 by the International Association of Firefighters in Boston in August 2004. Res. 15 called for further study and was amended to impose a moratorium on the placement of cell towers on fire stations throughout the US and Canada.”<sup>15 28</sup>  
Clearly, others who experience similar problems also deserve protections.



### Optional – More on the Science

**There is a robust literature showing that electromagnetic radiation, including in nonionizing frequencies, and at levels<sup>29, 30</sup> below those that are cause thermal effects (heating) – causes physiological effects, injury, and cell death –not only in humans but many animals and plants<sup>3, 7, 31-49</sup>. Unsurprisingly, industry has sought – against the tide of evidence to the contrary - to maintain that radiation must be ionizing or heating to cause injury.**

**Scores or hundreds of studies show that radiation, including specifically radiowave-microwave spectrum radiation, and including low-level exposure, can impair antioxidant defenses, increase “oxidative stress” (free radical injury) and damage mitochondria, the energy producing parts of cells<sup>1, 2, 34, 50-6930, 70-104105-13646, 137-171</sup>. These effects occur with ionizing and nonionizing radiation, at thermal and subthermal levels. (Indeed, much or most of the damage by ionizing radiation, and radiation above the thermal limit, occurs by mechanisms also documented to occur without ionization, and below the thermal limit.) These mechanisms cohere with the mechanisms documented to play a role in symptoms and health conditions that are reported in those who are electrosensitive – extending to seizures<sup>172-176</sup>, heart failure<sup>177-184</sup> and cognitive decline<sup>5, 32, 57, 108, 185-195</sup>.**

**These mechanisms have known involvement in induction of brain cancer, metabolic diseases like obesity and diabetes, autism, autoimmune disease, and neurodegenerative conditions, conditions that have exploded. In each case these have been linked, or presumptively linked, in some studies to electromagnetic radiation<sup>8, 9, 16, 34, 196-219</sup>.**

**Such radiation also has effects on sperm<sup>33, 100, 220-228</sup>; and the DNA of sperm<sup>229</sup> (consistent with recent news reports of marked recent declines in sperm counts and function)..**

**Such radiation also has toxic effects in pregnancy<sup>230</sup>, to the fetus and subsequent offspring<sup>231-235</sup> including at low levels<sup>236</sup>, and is tied to developmental problems in later life, including attention deficit and hyperactivity<sup>31, 235-241</sup>. It is critical to defend pregnant women (and eggs of girls who may at a later time become pregnant) from exposures with such toxicity.**

**Electromagnetic radiation across much or most of the spectrum (not excluding visible light) has been shown to depress levels of melatonin<sup>40, 72, 242-252</sup>, which is best known for its role in sleep (and indeed, impaired sleep is the most consistent symptom in affected individuals<sup>10, 11</sup>).**



**Melatonin is in fact a critical antioxidant that defends the body against harm from *many* toxic exposures<sup>253-266</sup> including electromagnetic radiation itself<sup>61, 66, 67, 82, 101, 107, 118, 121, 138, 144, 151, 204, 249, 267-284</sup> - reducing the oxidative stress** that is implicated in cancer, metabolic diseases like obesity and diabetes, autism, autoimmune disease, bipolar disorder and neurodegenerative conditions, and that also plays a role in heart attack and stroke<sup>9, 285-329330-343</sup>.

**Radiation, and specifically radiation in the radiowave-microwave portion of the spectrum can also depress levels of other critical antioxidant systems** that also defend the body against chemical, radiation, and other sources of injury. These other antioxidant systems include the glutathione system, superoxide dismutase and catalase<sup>81, 102, 115, 116, 233, 344-358</sup> - which are also involved in defending against health problems.

**This suggests that depression of antioxidant defenses due to electromagnetic radiation may magnify risk of chemically induced health effects (and depression of antioxidant systems due to some chemicals may amplify risk of harm from electromagnetic radiation).** Indeed just such effects have been reported<sup>359, 360</sup>.



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