

Electric and Magnetic Fields Supplement

There is concern about the potential for adverse health effects from exposure to electric and magnetic Fields (EMF) as the result of residing near high voltage transmission lines (HVTLS). Extremely low-frequency (ELF) - EMF that is emitted from HVTLS does not have the energy to ionize molecules or to heat them; however, they are fields of energy and thus have the potential to produce effects.

In the 1970s, epidemiological studies indicated a possible association between childhood leukemia and EMF levels. Since then, various types of research, including animal studies, epidemiological studies, clinical studies and cellular studies, have been conducted to examine the potential health effects of EMF. Scientific panels and commissions have reviewed and studied this research data. These studies have been conducted by, among others, the National Institute of Environmental Health Sciences (NIEHS), the World Health Organization (WHO), the International Agency for Research on Cancer (IARC), the Scientific Committee on Emerging and Newly Identified Health Risks (SCENIHR) and the Minnesota State Interagency Working Group (MSIWG). In general, these studies concur that:

- Based on epidemiological studies, there is a weak association between childhood leukemia and EMF exposure. There is however no consistent association between EMF exposure and other diseases in children or adults.
- Laboratory, animal, and cellular studies fail to show a cause and effect relationship between disease and EMF exposure at common EMF levels. A biological mechanism for how EMFs might cause disease has not been established.

Because a cause and effect relationship cannot be established, yet a weak association between childhood leukemia and EMF exposure has been shown: 1) the potential health effects of EMF are uncertain; 2) no methodology for estimating health effects based on EMF exposure exists; 3) further study of the potential health effects of EMF is needed; and 4) a precautionary approach, including regulations and guidelines, is needed in designing and using all electrical devices.

Researchers continue to study potential health effects related to ELF-EMF and potential causal mechanisms. The following sections provide brief summaries from scientific panels and commissions that have examined the potential health impacts of ELF-EMF.

In 1992, the U.S. Congress authorized the Electric and Magnetic Fields Research and Public Information Dissemination Program (EMF-RAPID program). Congress instructed NIEHS and the U.S. Department of Energy to direct and manage a program of research and analysis aimed at providing scientific evidence to clarify the potential for health risk from exposure to ELF-EMF. The program provided the following conclusions to Congress (NIEHS 1999, reference 1):

- "The scientific evidence suggesting that ELF-EMF exposures pose any health risk is weak.
- Epidemiological studies have serious limitations in their ability to demonstrate a cause and effect relationship whereas laboratory studies, by design, can clearly show that cause and effect are possible. Virtually all of the laboratory evidence in animals and humans and most of the mechanistic work done in cells fail to support a causal relationship between exposure to ELF-EMF at environmental levels and changes in biological function or disease status. The lack of consistent positive findings in animal or mechanistic studies weakens the belief that this

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association (the epidemiological association between ELF-EMF and childhood leukemia) is actually due to ELF-EMFs but it cannot completely discount the epidemiological findings.

- The NIEHS concludes that ELF-EMF exposure cannot be recognized as entirely safe because of weak scientific evidence that exposure may pose a leukemia hazard. In our opinion, this finding is insufficient to warrant aggressive regulatory concern. However, because virtually everyone in the United States uses electricity and therefore is routinely exposed to ELF-EMF, passive regulatory action is warranted such as a continued emphasis on education both the public and regulated community on means aimed at reducing exposures. The NIEHS does not believe that other cancers or non-cancer outcomes provide sufficient evidence of a risk to currently warrant concern.”

In 2002, the EMF-RAPID program published a detailed question and answer pamphlet summarizing research on ELF-EMF and potential health effects. The pamphlet is available at:

http://www.niehs.nih.gov/health/materials/electric_and_magnetic_fields_associated_with_the_use_of_electric_power_questions_and_answers_english_508.pdf

World Health Organization

In 1996, the WHO established the International EMF Project to study the potential health impacts of EMF. The project develops and disseminates information on EMF and public health. In 2007, the WHO issued an environmental health monograph on ELF-EMF (WHO 2007, reference 2). The monograph concluded:

- “Scientific evidence suggesting that everyday, chronic low-intensity (above 0.3 – 0.4 μ T) power-frequency magnetic field exposure poses a health risk is based on epidemiological studies demonstrating a consistent pattern of increased risk for childhood leukemia. Uncertainties in the hazard assessment include the role that control selection bias and exposure misclassification might have on the observed relationship between magnetic fields and childhood leukemia. In addition, virtually all of the laboratory evidence and the mechanistic evidence fail to support a relationship between low-level ELF magnetic fields and changes in biological function or disease status. Thus, on balance, the evidence is not strong enough to be considered causal, but sufficiently strong to remain a concern.
- A number of other diseases have been investigated for the possible association with ELF magnetic field exposures. These include cancers in children and adults, depression, suicide, reproductive dysfunction, developmental disorders, immunological modifications and neurological disease. The scientific evidence supporting a linkage between ELF magnetic fields and any of these diseases is much weaker than for childhood leukemia and in some cases (for example, for cardiovascular disease or breast cancer) the evidence is sufficient to give confidence that magnetic fields do not cause the disease.
- The use of precautionary approaches is warranted. However, electric power brings obvious health, social and economic benefits and precautionary approaches should not compromise these benefits. Furthermore, given both weakness of the evidence for a link between exposure to ELF magnetic fields and childhood leukemia and the limited impact on public health if there is a link, the benefits of exposure reduction on health are unclear. Thus, the costs of precautionary measures should be very low. The costs of implementing exposure reductions would vary from one country to another, making it very difficult to provide general recommendation for balancing the costs against the potential risk from ELF fields.”

International Agency for Research on Cancer

Since 1969, the IARC has been evaluating the carcinogenic risks of chemicals and other agents, such as viruses and radiation. In 2001, the IARC convened a working group of scientists to evaluate possible carcinogenic risks to humans from exposure to EMF (IARC 2002, reference 3). These scientists concluded that ELF magnetic fields are possibly carcinogenic to humans (a “Group 2B carcinogen”). Group 2B carcinogens are agents for which there is limited evidence of carcinogenicity in humans and less than sufficient evidence for carcinogenicity in experimental animals. The working group concluded:

- “Since the first report suggesting an association between residential ELF electric and magnetic fields and childhood leukemia was published in 1979, dozens of increasingly sophisticated studies have examined this association. In addition, there have been numerous comprehensive review, meta-analyses and two recent pooled analyses. In one pooled analysis...no excess risk was seen for exposure to ELF magnetic fields below 0.4 μ T and a twofold excess risk was seen for exposure above 0.4 μ T. [In the other study] a relative risk of 1.7 for exposure above 0.3 μ T was reported.
- No consistent relationship has been seen in studies of childhood brain tumors or cancers at other sites and residential ELF electric and magnetic fields.
- While a number of studies are available, reliable data on adult cancer and residential exposure to ELF electric and magnetic fields, including the use of appliances, are sparse and methodologically limited.... Although there have been considerable number of reports, a consistent association between residential exposure and adult leukemia and brain cancer has not been established.”

Scientific Committee on Emerging and Newly Identified Health Risks (SCENIHR)

The SCENIHR serves as an advisory committee to the European Commission. At the request of the Commission, the SCENIHR reviewed possible adverse health impacts due to EMF. In 2007, the committee concluded (SCENIHR 2007, reference 4):

- “The previous conclusion (by a prior advisory committee, the Scientific Committee on Toxicity, Ecotoxicity and the Environment, CSTE) that ELF magnetic fields are possibly carcinogenic, chiefly based on occurrence of childhood leukemia, is still valid. For breast cancer and cardiovascular disease, recent research has indicated that an association is unlikely. For neurodegenerative diseases and brain tumors, the link to ELF fields remains uncertain.”
- In vitro studies have documented that that low intensity ELF can inhibit the anti-proliferative effect of tamoxifen on a specific subclone of human MCF-7 breast cancer cells (Blackman et al. 2001, reference 5; Ishido et al. 2001, reference 6; Grgert et al. 2005, reference 7). There is a need for independent replication of certain studies suggesting genotoxic effects and for better understanding of combined effects of ELF magnetic fields with other agents, their effects on free radical homeostasis, as well as of the possible implications of ELF field inhibition of tamoxifen effects.

In 2009, the committee updated its prior opinion after reviewing new studies of ELF-EMF (SCENIHR 2009, reference 8) and concluded:

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- “The new information available is not sufficient to change the conclusions of the 2007 opinion. The few new epidemiological and animal studies that have addressed ELF exposure and cancer do not change the previous assessment that ELF magnetic fields are a possible carcinogen and might contribute to an increase in childhood leukemia. At present, in vitro studies did not provide a mechanistic explanation of this epidemiological finding.
- New epidemiological studies indicate a possible increase in Alzheimer’s disease arising from exposure to ELF. Further epidemiological and laboratory investigations of this observation are needed.”
- There remains a need for independent replication of certain studies suggesting genotoxic effects and for better understanding of combined effects of ELF magnetic fields with other agents, their effects on free radical homeostasis, as well as of the possible implications of ELF field inhibition of tamoxifen effects.

Minnesota State Interagency Working Group (MSIWG)

In 2002, the MSIWG on EMF issues was formed to examine the potential health impacts of EMF and to provide science-based information to policy makers in Minnesota. Working group members included representatives from the Department of Commerce, Department of Health, Pollution Control Agency, Public Utilities Commission, and Environmental Quality Board. The working group issued a white paper entitled “A White Paper on Electric and Magnetic Field (EMF) Policy and Mitigation Options” (MSIWG on EMF Issues 2002, reference 9). The white paper concluded:

- “Some epidemiological results do show a weak but consistent association between childhood leukemia and increasing exposure to EMF... However, epidemiological studies alone are considered insufficient for concluding that a cause and effect relationship exists and the association must be supported by data from laboratory studies. Existing laboratory studies have not substantiated this relationship... nor have scientists been able to understand the biological mechanism of how EMF could cause adverse effects. In addition, epidemiological studies of various other diseases, in both children and adults, have failed to show any consistent pattern of harm from EMF.
- The Minnesota Department of Health concludes that the current body of evidence is insufficient to establish a cause and effect relationship between EMF and adverse health effects. However, as with many other environmental health issues, the possibility of a health risk from EMF cannot be dismissed. Construction of new generation and transmission facilities to meet increasing electrical needs in the state is likely to increase exposure to EMF and public concern regarding potential adverse health effects.
- Based on its review, the Work Group believes the most appropriate public health policy is to take a prudent avoidance approach to regulating EMF. Based upon this approach, policy recommendations of the Work Group include:
 - Apply low-cost EMF mitigation options in electric infrastructure construction projects;
 - Encourage conservation;
 - Encourage distributed generation;
 - Continue to monitor EMF research;

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- Encourage utilities to work with customers on household EMF issues; and
- Provide public education on EMF issues.”

References

1. National Institute of Environmental Health Sciences, 1999. NIEHS Report on Health Effects from Exposure to Power-line Frequency Electric and Magnetic Fields. NIH Publication No. 99-4493
2. World Health Organization, 2007. Environmental Health Criteria 238 (2007): Extremely Low Frequency (ELF) Fields. ISBN 978-92-4-157238-5
3. International Agency for Research on Cancer, 2002. IARC Monographs on the Evaluation of Carcinogenic Risks to Humans. Volume 80. Non-Ionizing Radiation, Part 1: Static and Extremely Low-Frequency (ELF) Electric and Magnetic Fields. Summary of Data Reported and Evaluation
4. Scientific Committee on Emerging and Newly Identified Health Risks, 2007. Possible Effects of Electromagnetic Fields (EMF) on Human Health. Accessed November 2018 at: http://ec.europa.eu/health/ph_risk/committees/04_scenahr/docs/scenahr_o_007.pdf
5. Blackman, C. F., Benane, S. G., & House, D. E. (2001). The Influence of 1.2 μ T, 60 Hz Magnetic Fields on Melatonin- and Tamoxifen-Induced Inhibition of MCF-7 Cell Growth. *Bioelectromagnetics* (22), pp. 122-128.
6. Ishido, M., Nitta, H., & Kabuto, M. (2001). Magnetic fields (MF) of 50 Hz at 1.2 μ T as well as 100 μ T cause uncoupling of inhibitory pathways of adenylyl cyclase mediated by melatonin 1a receptor in MF-sensitive MCF-7 cells. *Carcinogenesis*, 22(7), pp. 1043-1048.
7. Girgert, R., Schimming, H., Korner, W., Grundker, C., & Hanf, V. (2005). Induction of tamoxifen resistance in breast cancer cells by ELF electromagnetic fields. *Biochemical and Biophysical Research Communications* (336), pp. 1144–1149.
8. Scientific Committee on Emerging and Newly Identified Health Risks, 2009. Health Effects of Exposure to EMF. Accessed November 2018 at: http://ec.europa.eu/health/ph_risk/committees/04_scenahr/docs/scenahr_o_022.pdf
9. The Minnesota State Interagency Working Group on EMF Issues, 2002. A White Paper on Electric and Magnetic Field (EMF) Policy and Mitigation Options. Accessed November 2018 at: <https://www.edockets.state.mn.us/EFiling/edockets/searchDocuments.do?method=showPoup&documentId=%7B474587DD-E5C5-4A6E-95BC-7BC805CE4975%7D&documentTitle=20101-45731-07>