



ASSOCIATION NATIONALE POUR LA SÉCURITÉ SANITAIRE DANS LES TECHNOLOGIES SANS FIL

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Membre du « Rassemblement pour la Planète »

**Objet:** assister et fédérer les personnes et les collectifs qui luttent pour la sécurité sanitaire des populations exposées aux nouvelles technologies de télécommunications sans fil

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## **Complaint on the basis of cell phone studies in SCENIHR final report and public consultation**

Prof Lennart Hardell's five studies were the subject of the letter from Dr. Kjell Hansson Mild to the Commission, arguing that all five studies were omitted from the preliminary opinion on purpose by Dr. Joachim Schüz. The commission replied, that the five studies would be taken into account in the final opinion, and that Dr. Schüz was an external expert.

According to the results of the public consultation on the final SCENIHR report, the SCENIHR replied on Hardell's submission, that "All references were considered in the Opinion".

But when Prof Hardell examined this, he found that this paper was not included:

Hardell L, Carlberg M, Söderqvist F, Hansson Mild K. Pooled analysis of case-control studies on acoustic neuroma diagnosed 1997-2003 and 2007-2009 and use of mobile and cordless phones. *Int J Oncol.* 2013;43:1036-1044. Epub 2013 Jul 22.

Studies that Hardell et al mentioned in the text and were not included:

Söderqvist F, Carlberg M, Hardell L. Review of four publications on the Danish cohort study on mobile phone subscribers and risk of brain tumors. *Reviews Environmental Health.* 2012; 27: 51-58.

Söderqvist F, Carlberg M, Hansson Mild K, Hardell L. Childhood brain tumour risk and its association with wireless phones: a commentary. *Environmental Health.* 2011; 10: 106.

de Vocht F, Hannam K, Buchan I. Environmental risk factors for cancers of the brain and nervous system: the use of ecological data to generate hypotheses. *Occup Environ Med* 2013; 70: 349-356.

## **Evidence supporting that Dr. Joachim Schüz had a decisive influence on the SCENIHR report**

According to Dr. Kjell Hansson Mild's letter, "He clearly stated that the epidemiological part was solely his responsibility to write and furthermore he himself was to decide what to include."

The BioInitiative scientists group found that SCENIHR gave a significant weight to an industry funded study, where Dr. Schüz participated, since SCENIHR "relies heavily on the much criticized Danish cohort study on mobile phone users with poor exposure data." The problem with the Danish Cohort is so critical, that there are scientists who think that it should have been retracted from publication. For explanation why, a clear summary is given by [www.microwavenews.com/DanishCohort.html](http://www.microwavenews.com/DanishCohort.html)

Also Mona Nilsson, a journalist who wrote two books on cell phone radiation risks and now heads the Swedish Radiation Protection Foundation, noted in her recent column, that "A flawed Danish Cohort is main argument for no risk" in the SCENIHR report:

<https://betweenrockandhardplace.wordpress.com/2015/04/01/guest-blog-from-mona-nilsson-on-recent-scenihr-report/>

**One of the papers that is omitted in the SCENIHR opinion, contains sharp criticism on the above Danish Cohort:** "Without long-term data, how can any large risk on the end points in question be excluded?...saying that the Danish study is "a text book example" for a threat on the validity of studies in this field of research. This criticism was published in the scientific literature. Since it was Dr. Schüz who ruled the epidemiology section, it is not surprising that he would want to eliminate this publication. But it does not mean that this publication is not true. On the contrary. (Söderqvist F, Carlberg M, Hardell L. Review of four publications on the Danish Cohort study on mobile phone subscribers and risk of brain tumors. *Reviews Environmental Health*. 2012; 27: 51-58).

**The SCENIHR opinion promotes the argument of no risk in the CEFALO study, where Dr. Schüz participated.** The risk that was found in this study, based on operator-recorded use, was downplayed in the SCENIHR report, although it was mentioned. The CEFALO study itself also downplayed the risk that was found. And Hardell's paper that criticized CEFALO bias was omitted from the final SCENIHR report (Söderqvist F, Carlberg M, Hansson Mild K, Hardell L. Childhood brain tumour risk and its association with wireless phones: a commentary. *Environmental Health*. 2011; 10: 106). The study was partly funded by the industry, by the Swiss Research Foundation on Mobile Communication (FSM), a body that was founded by ETH Zürich, Swisscom, Orange, Sunrise and 3G Mobile (liquidated in 2011). For cumulative duration of subscription, the users for more than 2.8 years had higher risk of brain tumors OR= 2.15 (95%CI 1.07, 4.29) from mobile phone use. This result was not reported to the press by the authors. Mona Nilsson, a Swedish journalist who authored two books on mobile phones and health, reported that the study was presented to the media as reassuring for cell phone users:

"The 'reassuring' results of a study on brain tumor risks associated with mobile phone use among children and adolescents were published on July 28, 2011 in the international press. However, the 'reassuring' conclusion was not based on the study's case-control data, as suggested in the widely spread press-releases, but solely on brain cancer incidence trends from the Swedish Cancer Registry. The latter is questioned for being underreported." (Nilsson, Mona. Mobile phones and children's brain tumor risks: Researchers found the highest risk in Sweden – but dismissed the risks based on underreported Swedish brain tumor incidence rates November 3, 2011)

*The main way in which the SCENIHR authors acted to downplay this risk, was also using the Swedish Cancer Registry data, although the study stands by itself. "Recruiting" the Swedish Cancer Registry in order to negate their findings, shows bias. It also stands in contrast to a recent exposure in the scientific literature, by Hardell et al: "The Swedish Cancer Register has not shown increasing incidence of brain tumors in recent years and has been used to dismiss epidemiological evidence on a risk....a large part of brain tumors of unknown type are never reported to the [Swedish] Cancer Register. Furthermore, the frequency of diagnosis based on autopsy has declined substantially due to a general decline of autopsies in Sweden adding further to missing cases. We conclude that the Swedish Cancer Register is not reliable to be used to dismiss results in epidemiological studies on the use of wireless phones and brain tumour risk." (Hardell L. and Carlberg M. Increasing Rates of Brain Tumours in the Swedish National Inpatient Register and the Causes of Death Register *Int. J. Environ. Res. Public Health* 2015, 12(4), 3793-3813; [www.mdpi.com/1660-4601/12/4/3793/htm](http://www.mdpi.com/1660-4601/12/4/3793/htm)*

**In the SCENIHR summary for the public, the main argument against increased brain tumor risk was that no increase was found in cancer registries. The same argument appears in a recent paper published in the scientific literature by Dr. Schüz. In both times, this argument is wrong and proves his bias is ruling. Why would the committee who are not experts in the field write something that is wrong, unless they have "directions" from external experts who are industry funded like Dr. Schüz?**

## **It is possible to influence especially as an external expert**

In her reply to Susan Foster, the Ombudsman wrote: "it appears from the Commission's reply that he could not have a decisive influence on the preliminary opinion since he intervened only as an external expert".

It is critical to understand, that Dr. Joachim *Schüiz* is influencing SCENIHR **because** he is an external expert. And this is as a result of the fact that the core group are not experts on radiation. In view of the fact that they don't control the field, WHO WILL INFLUENCE IF NOT THE EXTERNAL EXPERTS?....

The Ombudsman should not be misled on this point by the Commission. It is a critical point. What is it similar to? It is similar to the situation that is happening in Europe in general. No one is coming to the public telling them that brain tumors risk are related to cell phones although many scientists are doing major efforts and traveling to other countries to lecture and warn the public against it. Even after IARC classified radiofrequency radiation as possibly carcinogenic to humans, one of the major criticism of scientists that repeated in different forums (including the scientific literature the public is not exposed to), was that governments did not act.

Since the public is using cell phones massively, it is problematic to enable a committee that is not expert on radiation, and rely on external experts for professional input, and then to argue that since they are only external experts, they did not have a decisive influence. Only those who control the material can have decisive influence, the others can make errors not on purpose, not controlling the science.

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