### INTERPHONE ANALYSIS

# The Cellular companies and the Health Organizations do everything to hide the truth from us: The cellular causes cancer.

By Yafa Shir-Raz.

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It is hard to imagine our lives today without the mobile, and when 2 billion people around the world use the cell phones and the 3G is already here, the question whether the massive use of them is safe, sounds like atheism.

Can it be that within several years the cellulars will be found to be the cigarettes of the 21 century, and that we were all laboratory mice in the largest experiment in history?

This question is asked here and there with weak voice. What is heard loudly, from the scientists and the cellular companies is a key phrase, according to which,"there is no conclusive evidence" for the link between the radiation emitted from the cellular and brain tumors. Is it true?

10 years passed since the Interphone study has started in order to check this question. It is a multi- international study which is run by IARC (an arm of the WHO), in which 16 countries participate, including Israel.

The researchers in each one of the participating countries compared the rate of cellular phone use among people who got sick with brain tumors, to healthy people.



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Part of the findings were published in several countries, but there is not a summery of all of the findings although the study was finished already 2 years ago.

What we did find was an admission in findings that cannot be interpreted in two ways: A series of studies that show consistently an increased risk of brain tumors among people who use the mobile for more than 10 years. The tumor itself develops at the same side where the users hold the phone. This revelation was supplied to us by Dr. Sigal Sadezky, the main researcher of the Interphone's Israeli arm, and the manager of the epidemiology unit of cancer and radiation in Gertner Institute (Health Ministry).

But will these findings be told to the public with a clear voice?

And what happens with your kid who has been using the celullar for 2 years already?

It is not sure that the study will answer these questions, and even if it answers, it is not sure that we will believe the answers. A lot of money is invloved here and a lot of interests, and in this study that claims to be objective there are not few black holes that we will try to expose.

### The Celullar Companies participate in funding the study

Half of the Interphone's funding, and to be precise, 3.5 million Euro, comes from the celullar industry (the rest, 3.85 Euro comes from the EU).

More than that, part of the Interphone studies in Europe received additional grants from local cellular companies. According to prof Lennart Hardell, an oncologist from Orebero hospital in Sweden who publishes independent studies on the link between the cellular radiation to brain tumors, receiving grants from the industry was defined by the editor of the International Medicine Committee as "the most significant conflict of interest" that exists. Dr. Sadezky doesn't agree.

"The complementary funding is received by an indirect mechanism, through the organization UICC (the International union against cancer, Y.SH.), that established a real Chinese wall between the scientists and the funders, so there will not be any connection between them, and the researchers will have complete independence in editing the study and interpreting its results."

#### How exactly does it work?

"The UICC passed the money to the World Health Organization, and the WHO passed it to the researchers".'

#### And that's what you call a Chinese wall?

"It is definitely a wall that works, and I as a scientist can tell you that for my personal part, this mechanism works and I was never under pressure. In my personal opinion, not only is it not problematic, but it is also the duty of the cellular companies, and it is morally right. In an ordered mechanism in which the companies give the money but don't meet with the researchers, it is the best way to enjoy the two worlds".

## The cellular companies are exposed to the findings a week before they are published

According to the research contract, the funders and among them of course the celullar industry, have a right to see the findings of the studies a week before they are published. "The cellular companies raised bigger requests, and this was the compromise that was achieved" Sadezky gives an excuse. "the target is to enable the funders to organize with a reaction. It is important to note that also this compromise

is limited in the contract. A week, for example, can be shortened to only one day according to the limitation of the journal. Of course the paper will not be changed because of the fact that the funders read it first".

Is that so? Here is an example that contradicts this. Researchers from Scandinavia and Britain checked whether long term use raises the risk of acoustic neuroma, a benign tumor of the acoustic nerve that can cause deafness, at the same side of the head where the users hold the phone.

At the end of August 2005, many media sources around the world, published a sensational item that arrived from Reuters agency, which was passed by the scientists who carried out the study. The headlines gladly informed that the cellular is not dangerous. In the text it was written that according to the study, 10 years of cellular phone use did not increase the risk of acoustic neuroma.

But the study had another part, that for some reason was omitted from the press release: among long term users (for more than 10 years) there was a 80% higher risk of developing the tumor at the same side of the brain where they held the phone, in comparison to non-users. Dr. Anthony Swerdlow, one of the researchers, explained in reaction to the article that was published on the subject in "Haaretz" newspaper, that the data was omitted "in order to keep an easy language for the public to understand". Interesting.

"I think the findings were very important and it had to be emphasized in the media", says Dr. Sadezky, "but eventually, when you give the public the bottom line of the findings, each scientist interprets the important findings differently. Dr. Swerdlow thinks that these findings which are based on small number of users were not strong enough and that is why he thought it had to be treated with caution. In no way do I think that there is connetion between his opinion and the way the study is funded".

#### **The Hidden Interests of the Researchers**

The expression of Swerdlow and his collegues raised a lot of criticism in the international journalism and also among the researchers in the field, who have no doubt that the omission has - for sure - connection to the way the study was funded.

"If it walks like a duck, and it makes voices like a duck then you can be sure that it is a duck" says Mona Nilsson, a Swedish journalist who writes about the cell phones' health risks and also wrote a book on the subject ("The game of 3G").

"When you see how certain scientists of the Interphone behave, write and present things to the public consistently, it is hard to believe that it is an innocent conclusion".

Prof Hardell argued in the British Medical Journal that Swerdlow was also one of the authors of a study which received funding from the tobacco industry, and its findings, how not surprising, were in favour of the industry even then,

and he is not the only researcher of the Interphone with links to the tobacco industry.

Lately prof Anders Ahlbom, who is the head of the Swedish arm of the Interphone study, admitted that he was a consultant to the tobacco industry until 1996.

Incidently or not, Ahlbom takes also today a clear position in favour of the industry. With other researchers, he wrote in reaction to one of Hardell's studies, that the thought that cell phones can cause brain tumors is "biologically bizarre"

How much does it pay off to be on the industry side can be learnt from the case of Dr. Mike Repacholi, until recently one of the key persons in the management of the EMF project of the World Health Organization.

(Interview Mike Repacholi).

Under his control the WHO released a statement according to which, cell phones are safe and there is no need to take any special protection. The same Dr. Repacholi became a formal consultant of the cellular & power industries only several months after he had retired from his position in the WHO. It is interesting to note, that in a study that he led 10 years ago, he found a significant increase of 2.4 fold to develop non hodgkin's lymphoma in mice exposed to cellular radiation vs. control group. The study was funded by the biggest Australian cellular company "Telstra", and strangely enough, in spite of its importance, the findings were not published for two years. Even after they were published, the respected doctor continued to claim that there was no proof for negative effects of the phones.

#### The Code Word : "Regular User "

Believe it or not, but the definition of the term "regular user" in all of the Interphone studies in the world, is mobile use of once a week in average for at least 6 months.

In other words, it is a code name for "almost doesn't use cell phone". "You don't have to be a rocket scientist in order to understand that this definition is far from reality" says Iris Atzmon, an epidemiology doctorate student in the public health school of Haifa university who deals with the subject of the cellular dangers for many years and also wrote a book that summerizes the studies on the subject ("The cellular, not what you thought! The info that is hidden from the public").

"In reality, people talk for hours a day and when they decide to define the regular user this way, they dilute the heavy users with many consumers who almost don't use the cellular, and they bias the findings from the start towards no risk and no exposure".

Dr. Sadezky claims the definition is fair. "It is a threshold definition and its purpose is to separate the occasional users from the regular users".

## It is understandable why you filtered those who rarely use mobile, but what is not clear is why you did not take a higher threshold, that fits more to reality?

"As I said, it is only a minimum definition for the initial selection. In order to set the clean comparison group of "people who are not exposed to the cellular", the group which was defined as "regular users"

was asked in detail about their use habits. Accordingly the data is analyzed. It is exactly like in a study on smoking, we will define a person who smokes at least one cigarette a day or a week, and so in the non exposed group there will be remained people who never smoked or who smoke from time to time. After that, the data analysis refers to the amount of smoking according to the amount of boxes they smoke a day, duration of use etc.

Atzmon: "It is true that the categories are in the study, but eventually the way the main findings are presented is based on the morbidity among the "regular user". For example, it is written clearly in the German Interphone study

"The results of this study do not indicate an overall increased risk of glioma or meningioma among regular cellular phone users." The naïve reader can conclude the wrong conclusion, when he doesn't know that the trap is in the definition of regular user. Apart from that, I would like to see one study in which smoking is defined as one cigarette per month. Of course, if the studies on smoking had been designed this way, the link between cigarettes and cancer would have never been found until today".

#### Who counts the long- term users?

Because cancer develops over years, the exposure of a link between exposure to radiation and malignancy requires at least 10 years. But what a surprise, in the german interphone only 17 of the participants (I think there's a mistake in the number, it was 12 by memory I.A) who suffered from tumors used the cellular more than 10 years, and in the Swedish study only 20. These numbers seem especially tiny when we talk about a large study. "The use of the cellular started only in the late '80, but then they were owned of the business people and people from the higher classes "explains Dr. Sadezky. "the common use started only from the middle of the '90, so it is possible to find in the studies only small number of users for longer time than 10 years. It is an inevitable result of the number of years the technology exists". This argument sounds logical, and yet, in prof Hardell's studies the number of long term patients who developed tumors was much larger. For example, in the study that was published in 2006, there were 96 participants with tumors who used the cellular more than 10 years – 5 times more than the interphone Swedish study. Since also Hardell did the study in Sweden, the difference between the two studies is even more evident.

Accroding to Hardell, the claim that the technology doesn't exist long enough is not really valid in Sweden's case. "Sweden and Finland were the first countries in the world to present the cellular technology, because Nokia and Eriksson are local companies. So the number of long term users in Sweden is the largest in the world."

This is not the only difference between the Interphone and Hardell's studies:

Also the number of hours the participants talked on the cellular is much higher in Hardell's studies. While in his study the use of more than 10 years is 2,000 hours, which is parallel to one hour a day for ten years, in the Scandinavian-British study, the people who were defined as "heavy users" talked on the cellular for total 113 hours during 10 years.

#### **Did the cancer patients users bias the study?**

The more the studies accumulate, it is harder to conceal the fact that the findings insist on pointing to an increase in tumors after long term use.

These findings arise from independent studies that were done by researchers like prof Hardell, who found an increased risk of 4.2 to develop malignant tumors after more than 10 years of use, and from the Interphone studies which found, in spite of the small number of long term users, an increased risk to develop benign tumor at the same side of the head where they held the phone for 10 years or more. But no one will let the facts confuse the researchers. In one of the studies that

was published in 2006, and in which, by the way, Dr. Swerdlow also participated,

They found an original explanation for the phenomenon: they claimed that the increased risk was a result of a bias: the patients were more aware of their tumor location, probably thought that the tumor was caused by the phone use, so they probably exaggerated in their report on the amount of their cellular use, and biased the results towards risk.

This explanation doesn't convince even Dr. Sadezky: "It is not possible to ignore the fact that there is already a series of studies and all of them showed excess of risk for brain tumors development among cell phone users and that the tumors developed at the same side of head where they held the phone".

But the worrisome findings do not end here. From prof Hardell's study (2004) we learn that the link between the exposure and the tumors development is dose- dependent. The higher the number of hours of cellular use, the greater the risk for tumors. And more worrisome data: the greatest risk to develop the tumors was found in Hardell's study among people who started using the cellular before the age of 20. This study is the first to raise the question of the high risk among teenagers.

#### Why are the results in delay?

The data collection from the 16 centers that participate in the Interphone, was finished in 2005. But the findings are not seen on the horizon yet. Dr. Sadezky claims that there is a delay in the data analysis, but this delay, like the way this whole study is managed, teaches that one shouldn't hold his breath in expectation for a formal statement on "conclusive evidence".

Accroding to Sadezky, a first article on the Israeli data was already sent for publication but it can't be revealed to the public. "The fact that there were not found proofs for the link between exposure to the cellular and health risks, does not mean that there is not such a link" she admits. "Most studies that were published until today, suffered from two main problems: small sample and lack of a group that was exposed to the technology enough years. Who said that we need to go for 3rd and 4<sup>th</sup> generation? An important issue is children's use, who are a more vulnerable population from health point of view. "The politics of science, and the control of corporations over researchers, make it very hard to receive real answers from studies", says Atzmon.

"In order to advance the power of the public vs. the corporations control,

a more active involvement of the public is needed, independent search for information, and dare to doubt conventional assumptions.

The problem is that we as public, don't really want to know about the risks and that is how we enable the cellular industry to fool us".

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Non translated (because it repeats other articles and is not the focus of this article)

is a frame (page 36) on the non thermal mechanism that was found in Weizmann Institute, prof Rafi Korenstein's study (2003) and the BBB mechanism.. The a- thermal effect, which is ridiculously denied by the Interphone researchers, the ICNIRP & WHO is alive and well, thanks for asking.



Interview Dr Hours (AFSSET-France), " Children: Time exposure to the radiations of the mobile telephone."

Translation : in progress