

Appendix 8 – Seletun Resolution

Scientific panel on electromagnetic field health risks: consensus points, recommendations, and rationales.

Fragopoulou et al. (2010).

Abstract

In November, 2009, a scientific panel met in Seletun, Norway, for three days of intensive discussion on existing scientific evidence and public health implications of the unprecedented global exposures to artificial electromagnetic fields (EMF). EMF exposures (static to 300 GHz) result from the use of electric power and from wireless telecommunications technologies for voice and data transmission, energy, security, military and radar use in weather and transportation. The Scientific Panel recognizes that the body of evidence on EMF requires a new approach to protection of public health; the growth and development of the fetus, and of children; and argues for strong preventative actions.

10 Key Points:

1. Global populations are insufficiently protected, thus currently at risk;
2. Sensitive Populations are extra vulnerable;
3. Government actions are urgently warranted now, based on evidence of serious disruption to biological systems;
4. The Burden of Proof for the safety of radiation-emitting technologies should fall on Producers and Providers not Consumers;
5. EMF Exposures should be reduced in advance of complete understanding of mechanisms of action;
6. The current operative measure of Radiation Risk is inadequate, and misguides on safety and health risks;
7. An international Disease Registry is needed to track Time Trends of the incidence of Illnesses to correlate illnesses with exposures;
8. Pre-market health testing and safety demonstration is needed for all radiation-emitting technologies;
9. Parity is needed for occupational exposure standards, compared to those for the general public;
10. Persons with Electrohypersensitivity need the classification Functionally Impaired.

Reference

Fragopoulou et al. (2010). Scientific panel on electromagnetic field health risks: consensus points, recommendations, and rationales. Reviews on Environmental Health, 25(4), pp. 307-317.