

What insights can provocation studies provide?

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Surveys

• The "Mainzer EMF-Wachhund" (n=192)

Schuz et al. Bioelectromagnetics 2006;27:280-7

• The Essex survey (n=698)

Eltiti et al. Bioelectromagnetics 2007;28:137-51

The Roosli survey (n=394)

Roosli et al. Int. J. Environ. Health 2004;207:141-150

• The Hillert survey (n=167)

Hillert et al. Scand J. Work Environ. Health 2002;28:33-41

• The California survey (n=68)

Levallois et al. Environ. Health Perspectives 2002;110 Suppl 4:619-23

Almost any device...

People with EHS can react to EMFs from a huge range of sources:

- Televisions
- Mobile and digital cordless phones
- Fluorescent lights
- Computer monitors (VDTs, VDUs)
- Laptop computers, when used with mains adapters
- Powerlines
- Thyristors, systems used to control power in appliances such as vacuum cleaners
- Signalling circuits for cable TV
- Geopathic stress disturbances in the Earth's fields.

- Substations
- Mobile phone base station masts
- Underground electric cables
- Electric fields due to house wiring
- Telephones, answering machines and faxes
- Some new, upmarket cars, especially those equipped with RF CANBUS, or Bluetooth-enabled systems
- Electrical 'noise' in trains, underground trains, trams, buses and cars
- Wireless enabled laptops
- Electronic 'anti-theft' tagging scanners at the exits to many department stores.
- Refrigerators
- Freezers
- Electric cookers (including induction hobs)
- Vacuum cleaners
- Battery-operated appliances
- Fish tank heaters or lights
- Photocopiers
- Lamps with attached or built-in transformers
- Dimmer switches
- Burglar alarms
- Low-energy, mercury and sodium lights
- Fuse panels
- Water and gas pipelines with associated 'net' currents
- Uninterrupted power supplies (UPS)
- Hearing-aid induction loops
- Room fans
- Electronic medical procedures, especially MRI scans
- Daylight
- Weather changes
- Laser beams in supermarkets

...but some are more common than others

- Mobile phone basestations
- Mobile phones
- Cordless phones
- Powerlines
- Broadcast transmitters

Roosli et al. Int. J. Environ. Health 2004;207:141-150

Almost any symptom...

- "overall, 114 different health complaints were reported" Roosli et al. Int. J. Environ. Health 2004;207:141-150
- About 100 symptoms have been reported by sufferers Irvine ISBN 0 85951 570 2;2005 [box 3]
- "[of the 30 symptoms we asked about], except for impaired vision, EH subjects always reported more strong to severe health symptoms" *Schuz et al. Bioelectromagnetics* 2006;27:280-7
- "all [12] symptoms were considerably more frequent among persons who had ES" Hillert et al. Scand J. Work Environ. Health 2002;28:33-41
- "In our study [ES sufferers] had worse general health in almost every respect." Rubin et al. J Psychosom Res 2007

Rapid or Delayed Onset?

- "Within a few minutes" of exposure (53%)
- "Within a few hours" of exposure (21%)
- "Within a few days" of exposure (17%)
- (Symptoms tend to take slightly longer to go, than they take to appear).

What insights can provocation studies provide?

Your basic provocation study

- Get a group of willing volunteers, with rapid onset symptoms
- Real exposure on day 1, sham on day 2
- Do it double blind
- Randomise the order of exposures
- Allow a decent "wash out" period
- Check Participant feels ok at the start of each session
- Ask them how they feels after each session

What is out there?

- 31 provocation studies (n=725) in *Rubin et al Psychosom Med 2005;67:224-32*
- Since then, another 10 studies (n=342)

Wilen et al Bioelectromagnetics 2006;27:204-214 Regel et al Environ Health Perspect 2006;114:127-5 Eltiti et al Environ Health Perspect 2007;115:1603-1608 Rubin et al BMJ 2006;332:886-891 Oftedal et al Cephalagia 2007;27:447-55 Soo Kwon et al Bioelectromagnetics 2008;29:154-9 Hillert et al Bioelectromagnetics 2008;29:185-96 Bamiou et al Bioelectromagnetics 2008;29:108-17 Frick et al Bioelectromagnetics 2005;26:287-98 Langrebe et al Psychol Med 2008;on-line first

What is out there?

 Largely relate to short VDU or Mobile Phone exposures

• Measure short term symptoms

What do they show?

- "It has proved difficult to show under blind conditions that exposure to EMF can trigger these symptoms" Rubin et al 2005
- More recent studies support this conclusion.

• Nocebo effect is often found.

Limitations

- No shielding (or too much shielding)
- The 'real' exposure is missing a vital component
- The sham exposure isn't completely 'off'
- Worst cases can't take part
- What about chronic symptoms?
- What about WiFi / TETRA / UMTS / ...?
- What if only a minority really have ES?

Is there another explanation?



Is there any evidence for that?

• Yes

- You can create 'sensitivities' in people in the lab (e.g. Van den Bergh et al. Behav Res Ther 1995;33:517-27)
- Concern about substances predicts symptoms in real life (e.g. Petrie et al Psychosom Med 2005;67:778-82)

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Precaution makes people anxious

• In the lab (Wiedemann & Schuz Environ Health Perspect 2005;113:402-5)



• and in the real world

(Barnett et al Health Policy 2007;82:240-50)





Alarmist reporting can help trigger conditioning

 Media Warnings About Environmental Pollution Facilitate the Acquisition of Symptoms in Response to [Harmless] Chemical Substances.

Winters et al, Psychosom Med 2003;65:332-8

The precautionary principle

- Makes people anxious
- Makes people more likely to attribute symptoms to the precautionary thing
- Might increase levels of electrosensitivity?
- Be cautious about precaution