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March 31, 2006

Elizabeth O'Donnell
Executive Director
Kentucky Public Service Commission
211 Sower Boulevard
Frankfort, Kentucky 40601

Re: Application of Louisville Gas and Electric Company and Kentucky Utilities Company for a Certificate of Public Convenience and Necessity for the Construction of Transmission Facilities in Jefferson, Bullitt, Meade and Hardin Counties, Kentucky
Case Nos. 2005-00467 and 2005-00472
Our File No.: 400001/358725

Dear Ms. O'Donnell:

Enclosed is a copy of the information which my clients, Louisville Gas and Electric Company and Kentucky Utilities Company, provided to landowner Mary Jent as requested at the end of the hearing in the above-referenced proceedings on March 30, 2006. Per the Chairman's request, I am providing this information to you for inclusion in the case file. I am enclosing ten copies of this letter and information, and would appreciate it if you would return one copy, marked with the file-stamp of your office, to me in the enclosed self-addressed, stamped envelope.

We appreciate your attention to this matter. Should you have any questions or need any additional information, please contact me at your convenience.

Very truly yours,

J. Gregory Cornett

JGC/
Enclosure
cc: Parties of Record (w/ enclosure)

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Mrs. Mary Jent
9796 Big Springs Road
Rineyville, KY 40162

March 30, 2006

EMF Study Materials

Dear Mrs. Jent:

Per your request, I am enclosing copies of the EMF study materials referred to by Michael Winkler at the hearing today in Frankfort.

If you still have concerns or further questions, please contact our Right-of-Way Department at (502) 627-3160.

Sincerely,

Kathy Slay

Enclosures

NIEHS The National Institute of Environmental Health Sciences
EMF RAPID Electric and Magnetic Fields Research and Public Information Dissemination Program
EMF Questions Answers June 2002

3 Results of EMF Research

This chapter summarizes the results of EMF research worldwide, including epidemiological studies of children and adults, clinical studies of how humans react to typical EMF exposures, and laboratory research with animals and cells.

- **Is there a link between EMF exposure and childhood leukemia?**
- **What is the epidemiological evidence for evaluating a link between EMF exposure and childhood leukemia?**
- **Is there a link between EMF exposure and childhood brain cancer or other forms of cancer in children?**
- **Is there a link between residential EMF exposure and cancer in adults?**
- **Have clusters of cancer or other adverse health effects been linked to EMF exposure?**
- **If EMF does cause or promote cancer, shouldn't cancer rates have increased along with the increased use of electricity?**
- **Is there a link between EMF exposure in electrical occupations and cancer?**
- **Have studies of workers in other industries suggested a link between EMF exposure and cancer?**
- **Is there a link between EMF exposure and breast cancer?**
- **What have we learned from clinical studies?**
- **What effects of EMF have been reported in laboratory studies of cells?**
- **Have effects of EMF been reported in laboratory studies in animals?**
- **Can EMF exposure damage DNA?**

Q Is there a link between EMF exposure and childhood leukemia?

A Despite more than two decades of research to determine whether elevated EMF exposure, principally to magnetic fields, is related to an increased risk of childhood leukemia, there is still no definitive answer. Much progress has been made, however, with some lines of research leading to reasonably clear answers and others remaining unresolved. The best available evidence at this time leads to the following answers to specific questions about the link between EMF exposure and childhood leukemia:

- *Is there an association between power line configurations (wire codes) and childhood leukemia?* No.

- *Is there an association between measured fields and childhood leukemia?* Yes, but the association is weak, and it is not clear whether it represents a cause-and-effect relationship.

Q What is the epidemiological evidence for evaluating a link between EMF exposure and childhood leukemia?

A The initial studies, starting with the pioneering research of Dr. Nancy Wertheimer and Ed Leeper in 1979 in Denver, Colorado, focused on power line configurations near homes. Power lines were systematically evaluated and coded for their presumed ability to produce elevated magnetic fields in homes and classified into groups with higher and lower predicted magnetic field levels. Although the first study and two that followed in Denver and Los Angeles showed an association between wire codes indicative of elevated magnetic fields and childhood leukemia, larger, more recent studies in the central part of the United States and in several provinces of Canada did not find such an association. In fact, combining the evidence from all the studies, we can conclude with some confidence that wire codes are not associated with a measurable increase in the risk of childhood leukemia.

The other approach to assessing EMF exposure in homes focused on the measurements of magnetic fields. Unlike wire codes, which are only applicable in North America due to the nature of the electric power distribution system, measured fields have been studied in relation to childhood leukemia in research conducted around the world, including Sweden, England, Germany, New Zealand, and Taiwan. Large, detailed studies have recently been completed in the United States, Canada, and the United Kingdom that provide the most evidence for making an evaluation. These studies have produced variable findings, some reporting small associations, others finding no associations.

National Cancer Institute Study

In 1997, after eight years of work, Dr. Martha Linet and colleagues at the National Cancer Institute (NCI) reported the results of their study of childhood acute lymphoblastic leukemia (ALL). The case-control study involved more than 1,000 children living in 9 eastern and midwestern U.S. states and is the largest epidemiological study of childhood leukemia to date in the United States. To help resolve the question of wire code versus measured magnetic fields, the NCI researchers carried out both types of exposure assessment. Overall, Linet reported little evidence that living in homes with higher measured magnetic-field levels was a disease risk and found no evidence that living in a home with a high wire code configuration increased the risk of ALL in children.

United Kingdom Childhood Cancer Study

In December 1999, Sir Richard Doll and colleagues in the United Kingdom

announced that the largest study of childhood cancer ever undertaken-involving nearly 4,000 children with cancer in England, Wales, and Scotland-found no evidence of excess risk of childhood leukemia or other cancers from exposure to power-frequency magnetic fields. It should be noted, however, that because most power lines in the United Kingdom are underground, the EMF exposures of these children were mostly lower than 0.2 microtesla or 2 milligauss.

After reviewing all the data, the U.S. National Institute of Environmental Health Sciences (NIEHS) concluded in 1999 that the evidence was weak, but that it was still sufficient to warrant limited concern. The NIEHS rationale was that no individual epidemiological study provided convincing evidence linking magnetic field exposure with childhood leukemia, but the overall pattern of results for some methods of measuring exposure suggested a weak association between increasing exposure to EMF and increasing risk of childhood leukemia. The small number of cases in these studies made it impossible to firmly demonstrate this association. However, the fact that similar results had been observed in studies of different populations using a variety of study designs supported this observation.

A major challenge has been to determine whether the most highly elevated, but rarely encountered, levels of magnetic fields are associated with an increased risk of leukemia. Early reports focused on the risk associated with exposures above 2 or 3 milligauss, but the more recent studies have been large enough to also provide some information on levels above 3 or 4 milligauss. It is estimated that 4.5% of homes in the United States have magnetic fields above 3 milligauss, and 2.5% of homes have levels above 4 milligauss.

What is Cancer?

Cancer

"Cancer" is a term used to describe at least 200 different diseases, all involving uncontrolled cell growth. The frequency of cancer is measured by the incidence-the number of new cases diagnosed each year. Incidence is usually described as the number of new cases diagnosed per 100,000 people per year. The incidence of cancer in adults in the United States is 382 per 100,000 per year, and childhood cancers account for about 1% of all cancers. The factors that influence risk differ among the forms of cancer. Known risk factors such as smoking, diet, and alcohol contribute to specific types of cancer. (For example, smoking is a known risk factor for lung cancer, bladder cancer, and oral cancer.) For many other cancers, the causes are unknown.

Leukemia

Leukemia describes a variety of cancers that arise in the bone marrow where blood cells are formed. The leukemias represent less than 4% of all cancer cases in adults but are the most common form of cancer in children. For children age 4 and under, the incidence of childhood leukemia is approximately 6 per 100,000 per year, and it decreases with age to about 2 per 100,000 per year for children 10 and older. In the United States, the incidence of adult leukemia is about 10 cases per 100,000 people per year. Little is known about what causes leukemia, although genetic factors play a role. The only known causes are ionizing radiation, benzene, and other chemicals and drugs that suppress bone marrow function, and a human

T-cell leukemia virus.

Brain Cancer
Cancer of the central nervous system (the brain and spinal cord) is uncommon, with incidence in the United States now at about 6 cases in 100,000 people per year. The causes of the disease are largely unknown, although a number of studies have reported an association with certain occupational chemical exposures. Ionizing radiation to the scalp is a known risk factor for brain cancer. Factors associated with an increased risk for other types of cancer-such as smoking, diet, and excessive alcohol use-have not been found to be associated with brain cancer.

To determine what the integrated information from all the studies says about magnetic fields and childhood leukemia, two groups have conducted pooled analyses in which the original data from relevant studies were integrated and analyzed. One report (Greenland et al., 2000) combined 12 relevant studies with magnetic field measurements, and the other considered 9 such studies (Ahlbom et al., 2000). The details of the two pooled analyses are different, but their findings are similar. There is weak evidence for an association (relative risk of approximately 2) at exposures above 3 mG. However, few individuals had high exposures in these studies; therefore, even combining all studies, there is uncertainty about the strength of the association.

The following table summarizes the results for the epidemiological studies of EMF exposure and childhood leukemia analyzed in the pooled analysis by Greenland et al. (2000). The focus of the summary review was the magnetic fields that occurred three months prior to diagnosis. The results were derived from either calculated historical fields or multiple measurements of magnetic fields. The North American studies (Linet, London, McBride, Savitz) were 60 Hz; all other studies were 50 Hz. Results from the recent study from the United Kingdom are also included in the table. This study was included in the analysis by Ahlbom et al. (2000). The relative risk estimates from the individual studies show little or no association of magnetic fields with childhood leukemia. The study summary for the pooled analysis by Greenland et al. (2000) shows a weak association between childhood leukemia and magnetic field exposures greater 3 mG.

Residential Exposure to Magnetic Fields and Childhood Leukemia

	Magnetic field category (mG)					
	>1 -≤2 mG		>2 -≤3 mG		>3 mG	
First author	**Estimate**	**95% CL**	**Estimate**	**95% CL**	**Estimate**	**95% CL**
Coghill	0.54	0.17, 1.74	No controls	No controls	No controls	No controls
Dockerty	0.65	0.26, 1.63	2.83	0.29, 27.9	No controls	No controls
Feychting	0.63	0.08, 4.77	0.90	0.12, 7.00	4.44	1.67, 11.7
Linet	1.07	0.82, 1.39	1.01	0.64, 1.59	1.51	0.92, 2.49
London	0.96	0.54, 1.73	0.75	0.22, 2.53	1.53	0.67, 3.50
McBride	0.89	0.62, 1.29	1.27	0.74, 2.20	1.42	0.63, 3.21
Michaelis	1.45	0.78, 2.72	1.06	0.27, 4.16	2.48	0.79, 7.81
Olsen	0.67	0.07, 6.42	No cases	No cases	2.00	0.40, 9.93
Savitz	1.61	0.64, 4.11	1.29	0.27, 6.26	3.87	0.87, 17.3

Tomenius	0.57	0.33, 0.99	0.88	0.33, 2.36	1.41	0.38, 5.29
Tynes	1.06	0.25, 4.53	No cases	No cases	No cases	No cases
Verkasalo	1.11	0.14, 9.07	No cases	No cases	2.00	0.23, 17.7
Study summary	0.95	0.80, 1.12	1.06	0.79, 1.42	1.69*	1.25, 2.29
	1 - <2 mG		**2 - <4 mG**		**≥4 mG**	
**United Kingdom	0.84	0.57, 1.24	0.98	0.50, 1.93	1.00	0.30, 3.37

95% CL = 95% confidence limits.
Source: Greenland et al., 2000.
* Mantel-Haenszel analysis (p = 0.01). Maximum-likelihood summaries differed by less than 1% from these summaries; based on 2,656 cases and 7,084 controls. Adjusting for age, sex, and other variables had little effect on summary results
**These data are from a recent United Kingdom study not included in the Greenland analysis but included in another pooled analysis (Ahlbom et al. 2000). The United Kingdom study included 1,073 cases and 2,224 controls.
For this table, the column headed "estimate" describes the relative risk. Relative risk is the ratio of the risk of childhood leukemia for those in a magnetic field exposure group compared to persons with exposure levels of 1.0 mG or less. For example, Coghill estimated that children with exposures between 1 and 2 mG have 0.54 times the risk of children whose exposures were less than 1 mG. London's study estimates that children whose exposures were greater than 3 mG have 1.53 times the risk of children whose exposures were less than 1 mG. The column headed "95% CL" (confidence limits) describes how much random variation is in the estimate of relative risk. The estimate may be off by some amount due to random variation, and the width of the confidence limits gives some notion of that variation. For example, in Coghill's estimate of 0.54 for the relative risk, values as low as 0.17 or as high as 1.74 would not be statistically significantly different from the value of 0.54. Note there is a wide range of estimates of relative risk across the studies and wide confidence limits for many studies. In light of these findings, the pooling of results can be extremely helpful to calculate an overall estimate, much better than can be obtained from any study taken alone.

Q Is there a link between EMF exposure and childhood brain cancer or other forms of cancer in children?

A Although the earliest studies suggested an association between EMF exposure and all forms of childhood cancer, those initial findings have not been confirmed by other studies. At present, the available series of studies indicates no association between EMF exposure and childhood cancers other than leukemia. Far fewer of these studies have been conducted than studies of childhood leukemia.

Q Is there a link between residential EMF exposure and cancer in adults?

A The few studies that have been conducted to address EMF and adult cancer do not provide strong evidence for an association. Thus, a link has not been established between residential EMF exposure and adult cancers, including leukemia, brain cancer, and breast cancer (see table below).

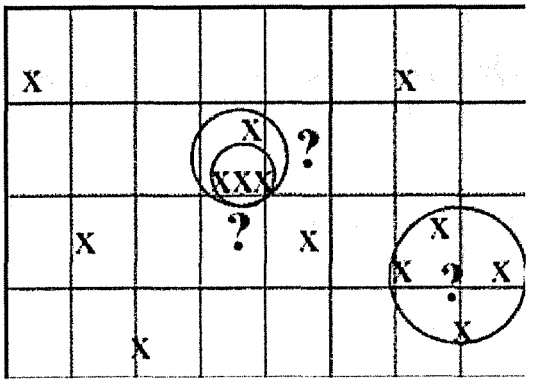
Residential Exposure to Magnetic Fields and Adult Cancer	
	Results (odds ratios)

First author	Location	Type of exposure data	Leukemia	CNS tumors	All cancers
Coleman	United Kingdom	Calculated historical fields	0.92	NA	NA
Feychting and Ahlbom	Sweden	Calculated & spot measurements	1.5*	0.7	NA
Li	Taiwan	Calculated historical fields	1.4*	1.1	NA
Li	Taiwan	Calculated historical fields		1.1 (breast cancer)	
McDowall	United Kingdom	Calculated historical fields	1.43	NA	1.03
Severson	Seattle, US	Wire codes & spot measurements	0.75	NA	NA
Wrensch	San Francisco, US	Wire codes & spot measurements	NA	0.9	NA
Youngson	United Kingdom	Calculated historical fields	1.88	NA	NA

CNS = central nervous system.
*The number is statistically significant (greater than expected by chance).
Study results are listed as "odds ratios" (OR). An odds ratio of 1.00 means there was no increase or decrease in risk. In other words, the odds that the people in the study who had the disease (in this case, cancer) and were exposed to a particular agent (in this case, EMF) are the same as for the people in the study who did not have the disease. An odds ratio greater than 1 may occur simply by chance, unless it is statistically significant.

Q Have clusters of cancer or other adverse health effects been linked to EMF exposure?

A An unusually large number of cancers, miscarriages, or other adverse health effects that occur in one area or over one period of time is called a "cluster." Sometimes clusters provide an early warning of a health hazard. But most of the time the reason for the cluster is not known. There have been no proven instances of cancer clusters linked with EMF exposure.



The definition of a "cluster" depends on how large an area is included. Cancer cases (x's in illustration) in a city, neighborhood, or workplace may occur in ways that suggest a cluster due to a common environmental cause. Often these patterns turn out to be due to chance. Delineation of a cluster is subjective—where do you draw the circles?

Q If EMF does cause or promote cancer, shouldn't cancer rates have increased along with the increased use of electricity?

A 

Not necessarily. Although the use of electricity has increased greatly over the years, EMF exposures may not have increased. Changes in building wiring codes and in the design of electrical appliances have in some cases resulted in lower magnetic field levels. Rates for various types of cancer have shown both increases and decreases through the years, due in part to improved prevention, diagnosis, reporting, and

treatment.

Q Is there a link between EMF exposure in electrical occupations and cancer?

A For almost as long as we have been concerned with residential exposure to EMF and childhood cancers, researchers have been studying workplace exposure to EMF and adult cancers, focusing on leukemia and brain cancer. This research began with surveys of job titles and cancer risks, but has progressed to include very large, detailed studies of the health of workers, especially electric utility workers, in the United States, Canada, France, England, and several Northern European countries. Some studies have found evidence that suggests a link between EMF exposure and both leukemia and brain cancer, whereas other studies of similar size and quality have not found such associations.

- **California** - A 1993 study of 36,000 California electric utility workers reported no strong, consistent evidence of an association between magnetic fields and any type of cancer.

- **Canada/France** - A 1994 study of more than 200,000 utility workers in 3 utility companies in Canada and France reported no significant association between all leukemias combined and cumulative exposure to magnetic fields. There was a slight, but not statistically significant, increase in brain cancer. The researchers concluded that the study did not provide clear-cut evidence that magnetic field exposures caused leukemia or brain cancer.

- **North Carolina** - Results of a 1995 study involving more than 138,000 utility workers at 5 electric utilities in the United States did not support an association between occupational magnetic field exposure and leukemia, but suggested a link to brain cancer.

- **Denmark** - In 1997 a study of workers employed in all Danish utility companies reported a small, but statistically significant, excess risk for all cancers combined and for lung cancer. No excess risk was observed for leukemia, brain cancers, or breast cancer.

- **United Kingdom** - A 1997 study among electrical workers in the United Kingdom did not find an excess risk for brain cancer. An extension of this work reported in 2001 also found no increased risk for brain cancer.

Efforts have also been made to pool the findings across several of the above studies to produce more accurate estimates of the association between EMF and cancer (Kheifets et al., 1999). The combined summary statistics across studies provide insufficient evidence for an association between EMF exposure in the workplace and either leukemia or brain cancer.

Q Have studies of workers in other industries suggested a link between EMF exposure and cancer?

A 

One of the largest studies to report an association between cancer and magnetic field exposure in a broad range of industries was conducted in Sweden (1993). The study included an assessment of EMF exposure in 1,015 different workplaces and involved more than 1,600 people in 169 different occupations. An association was reported between estimated EMF exposure and increased risk for chronic lymphocytic leukemia. An association was also reported between exposure to magnetic fields and brain cancer, but there was no dose-response relationship.

Another Swedish study (1994) found an excess risk of lymphocytic leukemia among railway engine drivers and conductors. However, the total cancer incidence (all tumors included) for this group of workers was lower than in the general Swedish population. A study of Norwegian railway workers found no evidence for an association between EMF exposure and leukemia or brain cancer. Although both positive and negative effects of EMF exposure have been reported, the majority of studies show no effects.

Q Is there a link between EMF exposure and breast cancer?

A Researchers have been interested in the possibility that EMF exposure might cause breast cancer, in part because breast cancer is such a common disease in adult women. Early studies identified a few electrical workers with male breast cancer, a very rare disease. A link between EMF exposure and alterations in the hormone melatonin was considered a possible hypothesis. This idea provided motivation to conduct research addressing a possible link between EMF exposure and breast cancer. Overall, the published epidemiological studies have not shown such an association.

Q What have we learned from clinical studies?

A Laboratory studies with human volunteers have attempted to answer questions such as,

- *Does EMF exposure alter normal brain and heart function?*
- *Does EMF exposure at night affect sleep patterns?*
- *Does EMF exposure affect the immune system?*
- *Does EMF exposure affect hormones?*

The following kinds of biological effects have been reported. Keep in mind that a biological effect is simply a measurable change in some biological response. It

may or may not have any bearing on health.

- **Heart rate**
  An inconsistent effect on heart rate by EMF exposure has been reported. When observed, the biological response is small (on average, a slowing of about three to five beats per minute), and the response does not persist once exposure has ended.

  Two laboratories, one in the United States and one in Australia, have reported effects of EMF on heart rate variability. Exposures used in these experiments were relatively high (about 300 mG), and lower exposures failed to produce the effect. Effects have not been observed consistently in repeated experiments.

- **Sleep electrophysiology**
  A laboratory report suggested that overnight exposure to 60-Hz magnetic fields may disrupt brain electrical activity (EEG) during night sleep. In this study subjects were exposed to either continuous or intermittent magnetic fields of 283 mG. Individuals exposed to the intermittent magnetic fields showed alterations in traditional EEG sleep parameters indicative of a pattern of poor and disrupted sleep. Several studies have reported no effect with continuous exposure.

- **Hormones, immune system, and blood chemistry**
  Several clinical studies with human volunteers have evaluated the effects of power-frequency EMF exposure on hormones, the immune system, and blood chemistry. These studies provide little evidence for any consistent effect.

- **Melatonin**
  The hormone melatonin is secreted mainly at night and primarily by the pineal gland, a small gland attached to the brain. Some laboratory experiments with cells and animals have shown that melatonin can slow the growth of cancer cells, including breast cancer cells. Suppressed nocturnal melatonin levels have been observed in some studies of laboratory animals exposed to both electric and magnetic fields. These observations led to the hypothesis that EMF exposure might reduce melatonin and thereby weaken one of the body's defenses against cancer.

  Many clinical studies with human volunteers have now examined whether various levels and types of magnetic field exposure affect blood levels of melatonin. Exposure of human volunteers at night to power-frequency EMF under controlled laboratory conditions has no apparent effect on melatonin. Some studies of people exposed to EMF at work or at home do report evidence for a small suppression of melatonin. It is not clear whether the decreases in melatonin reported under environmental

conditions are related to the presence of EMF exposure or to other factors.

Q What effects of EMF have been reported in laboratory studies of cells?

A Over the years, scientists have conducted more than 1,000 laboratory studies to investigate potential biological effects of EMF exposure. Most have been in vitro studies; that is, studies carried out on cells isolated from animals and plants, or on cell components such as cell membranes. Other studies involved animals, mainly rats and mice. In general, these studies do not demonstrate a consistent effect of EMF exposure.

Most in vitro studies have used magnetic fields of 1,000 mG (100 μT) or higher, exposures that far exceed daily human exposures. In most incidences, when one laboratory has reported effects of EMF exposure on cells, other laboratories have not been able to reproduce the findings. For such research results to be widely accepted by scientists as valid, they must be replicated--that is, scientists in other laboratories should be able to repeat the experiment and get similar results. Cellular studies have investigated potential EMF effects on cell proliferation and differentiation, gene expression, enzyme activity, melatonin, and DNA. Scientists reviewing the EMF research literature find overall that the cellular studies provide little convincing evidence of EMF effects at environmental levels.

Q Have effects of EMF been reported in laboratory studies in animals?

A Researchers have published more than 30 detailed reports on both long-term and short-term studies of EMF exposures in laboratory animals (bioassays). Long-term animal bioassays constitute an important group of studies in EMF research. Such studies have a proven record for predicting the carcinogenicity of chemicals, physical agents, and other suspected cancer-causing agents. In the EMF studies, large groups of mice or rats were continuously exposed to EMF for two years or longer and were then evaluated for cancer. The U.S. National Toxicology Program (**http://ntp-server.niehs.nih.gov/**) has an extensive historical database for hundreds of different chemical and physical agents evaluated using this model. EMF long-term bioassays examined leukemia, brain cancer, and breast cancer--the diseases some epidemiological studies have associated with EMF exposure.

Several different approaches have been used to evaluate effects of EMF exposure in animal bioassays. To investigate whether EMF could promote cancer after genetic damage had occurred, some long-term studies used cancer initiators such as ultraviolet light, radiation, or certain chemicals that are known to cause genetic damage. Researchers compared groups of animals treated with

cancer initiators to groups treated with cancer initiators and then exposed to EMF, to see if EMF exposure promoted the cancer growth (initiation-promotion model). Other studies tested the cancer promotion potential of EMF using mice that were predisposed to cancer because they had defects in the genes that control cancer.

Animal Leukemia Studies: Long-Term, Continuous Exposure Studies, Two or More Years in Length

First author	Sex/species	Exposure/animal numbers	Results
Babbitt (U.S.)	Female mice	14,000 mG, 190 or 380 mice per group. Some groups treated with ionizing radiation.	No effect
Boorman (U.S.)	Male and female rats	20 to 10,000 mG, 100 per group	No effect
McCormick (U.S.)	Male and female mice	20 to 10,000 mG, 100 per group	No effect
Mandeville (Canada)	Female rats	20 to 20,000 mG, 50 per group *In utero* exposure	No effect
Yasui (Japan)	Male and female rats	5,000 to 50,000 mG, 50 per group	No effect

Leukemia

Fifteen animal leukemia studies have been completed and reported. Most tested for effects of exposure to power-frequency (60-Hz) magnetic fields using rodents. Results of these studies were largely negative. The Babbitt study evaluated the subtypes of leukemia. The data provide no support for the reported epidemiology findings of leukemia from EMF exposure. Many scientists feel that the lack of effects seen in these laboratory leukemia studies significantly weakens the case for EMF as a cause of leukemia.

Breast Cancer

Researchers in the Ukraine, Germany, Sweden, and the United States have used initiation-promotion models to investigate whether EMF exposure promotes breast cancer in rats.

The results of these studies are mixed; while the German studies showed some effects, the Swedish and U.S. studies showed none. Studies in Germany reported effects on the numbers of tumors and tumor volume. A National Toxicology Program long-term bioassay performed without the use of other cancer-initiating substances showed no effects of EMF exposure on the development of mammary tumors in rats and mice.

The explanation for the observed difference among these studies is not readily apparent. Within the limits of the experimental rodent model of mammary carcinogenesis, no conclusions are possible regarding a promoting effect of EMF on chemically induced mammary cancer.

Other Cancers

Tests of EMF effects on skin cancer, liver cancer, and brain cancer have been conducted using both initiation-promotion models and non-initiated long-term

bioassays. All are negative.

Three positive studies were reported for a co-promotion model of skin cancer in mice. The mice were exposed to EMF plus cancer-causing chemicals after cancers had already been initiated. The same research team as well as an independent laboratory were unable to reproduce these results in subsequent experiments.

Non-cancer Effects
Many animal studies have investigated whether EMF can cause health problems other than cancer. Researchers have examined many endpoints, including birth defects, immune system function, reproduction, behavior, and learning. Overall, animal studies do not support EMF effects on non-cancer endpoints.

Q Can EMF exposure damage DNA?

A Studies have attempted to determine whether EMF has genotoxic potential; that is, whether EMF exposure can alter the genetic material of living organisms. This question is important because genotoxic agents often also cause cancer or birth defects. Studies of genotoxicity have included tests on bacteria, fruit flies, and some tests on rats and mice. Nearly 100 studies on EMF genotoxicity have been reported. Most evidence suggests that EMF exposure is not genotoxic. Based on experiments with cells, some researchers have suggested that EMF exposure may inhibit the cell's ability to repair normal DNA damage, but this idea remains speculative because of the lack of genotoxicity observed in EMF animal studies.

On to Your EMF Environment

EMF Questions & Answers Home | Introduction | EMF Basics | Evaluating Potential Health Effects | Results of EMF Research | Your EMF Environment | EMF Exposure Standards | National and International EMF Reviews | References

EMF*RAPID* Home | NIEHS Home
For More Information About EMF: **Web Center**
Last Modified: 01 Oct 2002

NIEHS The National Institute of Environmental Health Sciences

EMF RAPID Electric and Magnetic Fields Research and Public Information Dissemination Program

EMF Questions Answers June 2002

4 Your EMF Environment

Part 2

This chapter discusses typical magnetic field exposures in home and work environments and identifies common EMF sources and field intensities associated with these sources.

- How do we define EMF exposure?
- How is EMF exposure measured?
- What are some typical EMF exposures?
- What are typical EMF exposures for people living in the United States?
- What levels of EMF are found in common environments?
- What EMF field levels are encountered in the home?
- What are EMF levels close to electrical appliances?
- What EMF levels are found near power lines?
- How strong is the EMF from electric power substations?
- Do electrical workers have higher EMF exposure than other workers?
- What are possible EMF exposures in the workplace?
- What are some typical sources of EMF in the workplace?
- What EMF exposure occurs during travel?
- How can I find out how strong the EMF is where I live and work?
- How much do computers contribute to my EMF exposure?
- What can be done to limit EMF exposure?

Q What EMF levels are found near power lines?

A Power transmission lines bring power from a generating station to an electrical substation. Power distribution lines bring power from the substation to your home. Transmission and distribution lines can be either overhead or underground. Overhead lines produce both electric fields and magnetic fields. Underground lines do not produce electric fields above ground but may produce magnetic fields above ground.

Power transmission lines
Typical EMF levels for transmission lines are shown in the chart on **page 37**. At a distance of 300 feet and at times of average electricity demand, the magnetic fields from many lines can be similar to typical background levels found in most homes. The distance at which the magnetic field from the line becomes indistinguishable from typical background levels differs for different types of lines.

Power Distribution Lines
Typical voltage for power distribution lines in North America ranges from 4 to 24 kilovolts (kV). Electric field levels directly beneath overhead distribution lines may vary from a few volts per meter to 100 or 200 volts per meter. Magnetic fields directly beneath overhead distribution lines typically range from 10 to 20 mG for main feeders and less than 10 mG for laterals. Such levels are also typical directly above underground lines. Peak EMF levels, however, can vary considerably depending on the amount of current carried by the line. Peak magnetic field levels as high as 70 mG have been measured directly below overhead distribution lines and as high as 40 mG above underground lines.

Q How strong is the EMF from electric power substations?

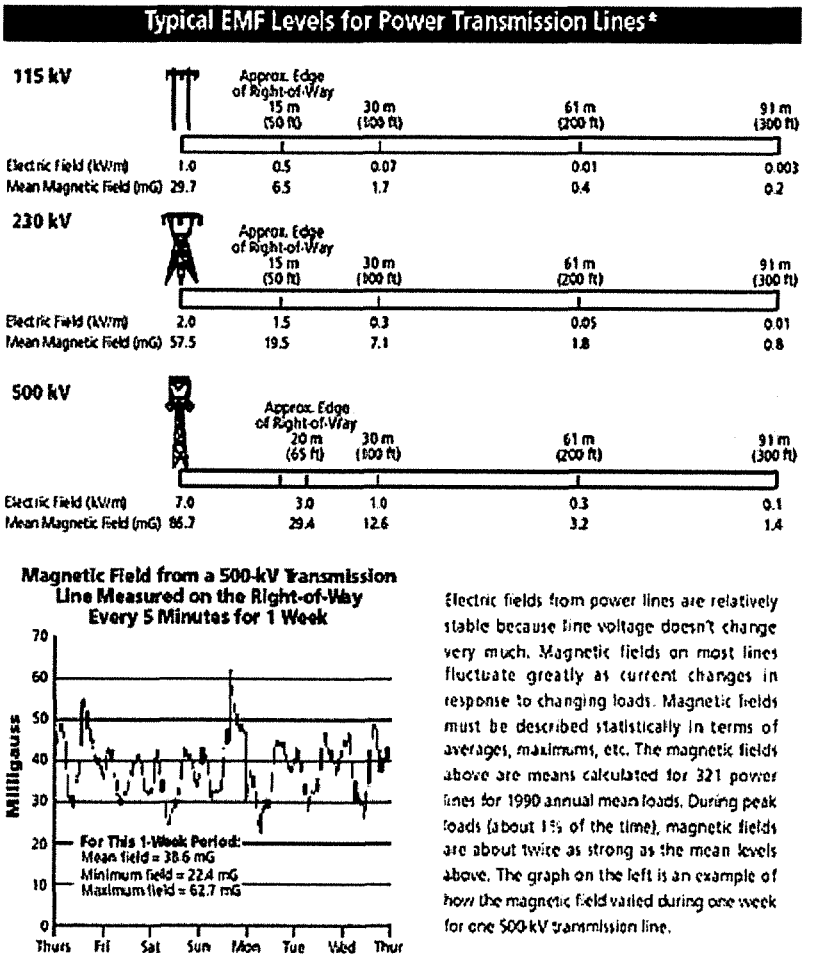
A In general, the strongest EMF around the outside of a substation comes from the power lines entering and leaving the substation. The strength of the EMF from equipment within the substations, such as transformers, reactors, and capacitor banks, decreases rapidly with increasing distance. Beyond the substation fence or wall, the EMF produced by the substation equipment is typically indistinguishable from background levels.

Q Do electrical workers have higher EMF exposure than other workers?

A Most of the information we have about occupational EMF exposure comes from studies of electric utility workers. It is therefore difficult to compare electrical workers' EMF exposures with those of other workers because there is less information about EMF exposures in work environments other than electric utilities. Early studies did not include actual measurements of EMF exposure on the job but used job titles as an estimate of EMF exposure among electrical workers. Recent studies, however, have included extensive EMF exposure assessments.

A report published in 1994 provides some information about estimated EMF exposures of workers in Los Angeles in a number of electrical jobs in electric utilities and other industries. Electrical workers had higher average EMF exposures (9.6 mG) than did workers in other jobs (1.7 mG). For this study, the category "electrical workers" included electrical engineering technicians, electrical engineers, electricians, power line workers, power station operators,

telephone line workers, TV repairers, and welders.



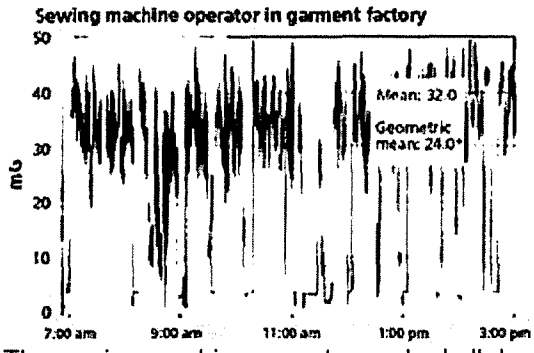
*These are typical EMFs at 1 m (3.3 ft) above ground for various distances from power lines in the Pacific Northwest. They are for general information. For information about a specific line, contact the utility that operates the line.
Source: Bonneville Power Administration, 1994.

****Click Here to See Large Image****

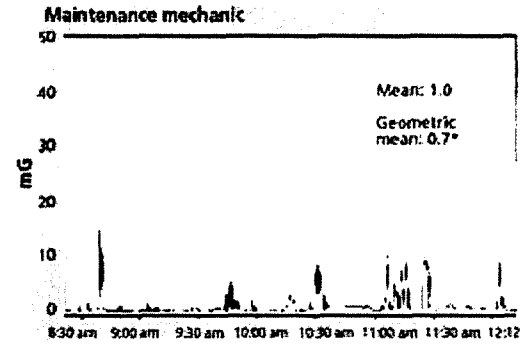
Q What are possible EMF exposures in the workplace?

A The figures below are examples of magnetic field exposures determined with exposure meters worn by four workers in different occupations. These measurements demonstrate how EMF exposures vary among individual workers. They do not necessarily represent typical EMF exposures for workers in these occupations.

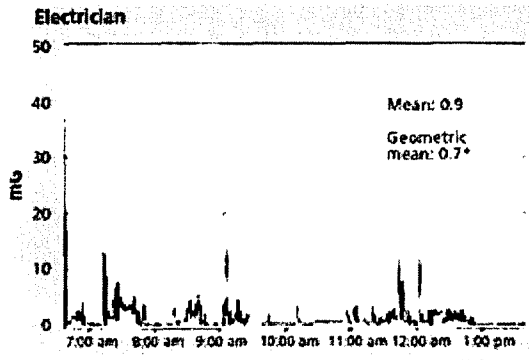
Magnetic Field Exposures of Workers (mG)



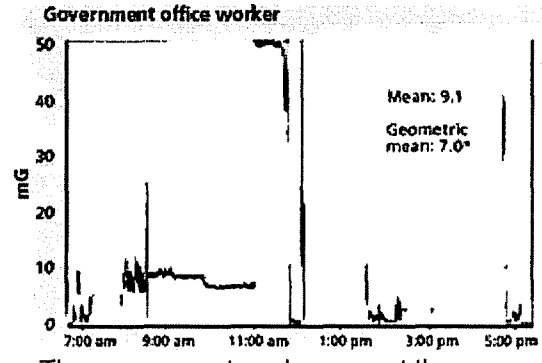
The sewing machine operator worked all day, took a 1-hour lunch break at 11:15 am, and took 10-minute breaks at 8:55 am and 2:55 pm.



The mechanic repaired a compressor at 9:45 am and 11:10 am.



The electrician repaired a large air-conditioning motor at 9:10 am and at 11:45 am.



The government worker was at the copy machine at 8:00 am, at the computer from 11:00 am to 1:00 pm and also from 2:30 pm to 4:30 pm.

*The geometric mean is calculated by squaring the values, adding the squares, and then taking the square root of the sum. Source: National Institute for Occupational Safety and Health and U.S. Department of Energy.

****Click Here to See Large Image****

The tables below can give you a general idea about magnetic field levels for different jobs and around various kinds of electrical equipment. It is important to remember that EMF levels depend on the actual equipment used in the workplace. Different brands or models of the same type of equipment can have different magnetic field strengths. It is also important to keep in mind that the strength of a magnetic field decreases quickly with distance.

EMF Measurements During a Workday		
	ELF magnetic fields measured in mG	
Industry and occupation	Median for occupation*	Range for 90% of workers**
ELECTRICAL WORKERS IN VARIOUS INDUSTRIES		
Electrical engineers	1.7	0.5-12.0
Construction electricians	3.1	1.6-12.1
TV repairers	4.3	0.6-8.6

Welders	9.5	1.4-66.1
ELECTRIC UTILITIES		
Clerical workers without computers	0.5	0.2-2.0
Clerical workers with computers	1.2	0.5-4.5
Line workers	2.5	0.5-34.8
Electricians	5.4	0.8-34.0
Distribution substation operators	7.2	1.1-36.2
Workers off the job (home, travel, etc.)	0.9	0.3-3.7
TELECOMMUNICATIONS		
Install, maintenance, & repair technicians	1.5	0.7-3.2
Central office technicians	2.1	0.5-8.2
Cable splicers	3.2	0.7-15.0
AUTO TRANSMISSION MANUFACTURE		
Assemblers	0.7	0.2-4.9
Machinists	1.9	0.6-27.6
HOSPITALS		
Nurses	1.1	0.5-2.1
X-ray technicians	1.5	1.0-2.2
SELECTED OCCUPATIONS FROM ALL ECONOMIC SECTORS		
Construction machine operators	0.5	0.1-1.2
Motor vehicle drivers	1.1	0.4-2.7
School teachers	1.3	0.6-3.2
Auto mechanics	2.3	0.6-8.7
Retail sales	2.3	1.0-5.5
Sheet metal workers	3.9	0.3-48.4
Sewing machine operators	6.8	0.9-32.0
Forestry and logging jobs	7.6	0.6-95.5***

If you have questions or want more information about your EMF exposure at work, your plant safety officer, industrial hygienist, or other local safety official can be a good source of information. The National Institute for Occupational Safety and Health (NIOSH) is asked occasionally to conduct health hazard evaluations in workplaces where EMF is a suspected cause for concern. For further technical assistance contact NIOSH at 800-356-4674.

Q What are some typical sources of EMF in the workplace?

A 

Exposure assessment studies so far have shown that most people's EMF exposure at work comes from electrical appliances and tools and from the building's power supply. People who work near transformers, electrical closets, circuit boxes, or other high-current electrical equipment may have 60-Hz magnetic field exposures of hundreds of milligauss or more. In offices, magnetic field levels are often similar to those found at home, typically 0.5 to 4.0 mG. However, these levels can increase dramatically near certain types of equipment.

EMF Spot Measurements

Industry and sources	ELF magnetic fields (mG)	Other frequencies	Comments
ECTRICAL EQUIPMENT USED IN MACHINE MANUFACTURING			
ctric resistance heater	6,000-14,000	VLF	
uction heater	10-460	High VLF	
nd-held grinder	3,000	-	Tool exposures measured at operator's chest.
nder	110	-	Tool exposures measured at operator's chest.
ne, drill press, etc.	1-4	-	Tool exposures measured at operator's chest.
JMINUM REFINING			
minum pot rooms	3.4-30	Very high static field	Highly-rectified DC current (with an ELF ripple refines aluminum.
tification room	300-3,300	High static field	
EEL FOUNDRY			
le refinery			
rnace active	170-1,300	High ULF from the ladle's big magnetic stirrer	Highest ELF field was at the chair of control room operator.
rnace inactive	0.6-3.7	High ULF from the ladle's big magnetic stirrer	Highest ELF field was at the chair of control room operator.
trogalvanizing unit	2-1,100	High VLF	
LEVISION BROADCASTING			
eo cameras udio and minicams)	7.2-24.0	VLF	
eo tape degaussers	160-3,300	-	Measured 1 ft away.
t control centers	10-300	-	Walk-through survey.
dio and newsrooms	2-5	-	Walk-through survey.
SPITALS			
nsive care unit	0.1-220	VLF	Measured at nurse's chest.
t-anesthesia care unit	0.1-24	VLF	
gnetic resonance imaging (MRI)	0.5-280	Very high static field, VLF and RF	Measured at technician's work locations.
ANSPORTATION			
s, minivans, and trucks	0.1-125	Most frequencies less than 60 Hz	Steel-belted tires are the principal ELF source for gas/diesel vehicles.
(diesel powered)	0.5-146	Most frequencies less than 60 Hz	
tric cars	0.1-81	Some elevated static fields	
rgers for electric cars	4-63	-	Measured 2 ft from charger.
tric buses	0.1-88	-	Measured at waist. Fields at ankles 2-5 times higl
tric train passenger cars	0.1-330	25 & 60 Hz power on U.S. trains	Measured at waist. Fields at ankles 2-5 times higl
ner	0.8-24.2	400 Hz power on airliners	Measured at waist.
VERNMENT OFFICES			
k work locations	0.1-7	-	Peaks due to laser printers.
ks near power center	18-50	-	
ver cables in floor	15-170	-	
ding power supplies	25-1,800	-	
opener	3,000	-	Appliance fields measured 6 in. away.
ktop cooling fan	1,000	-	Appliance fields measured 6 in. away.
er office appliances	10-200	-	

ırce: National Institute for Occupational Safety and Health, 2001.
: (ultra low frequency)-frequencies above 0, below 3 Hz.
: (extremely low frequency)-frequencies 3-3,000 Hz.
: (very low frequency)-frequencies 3,000-30,000 Hz (3-30 kilohertz).

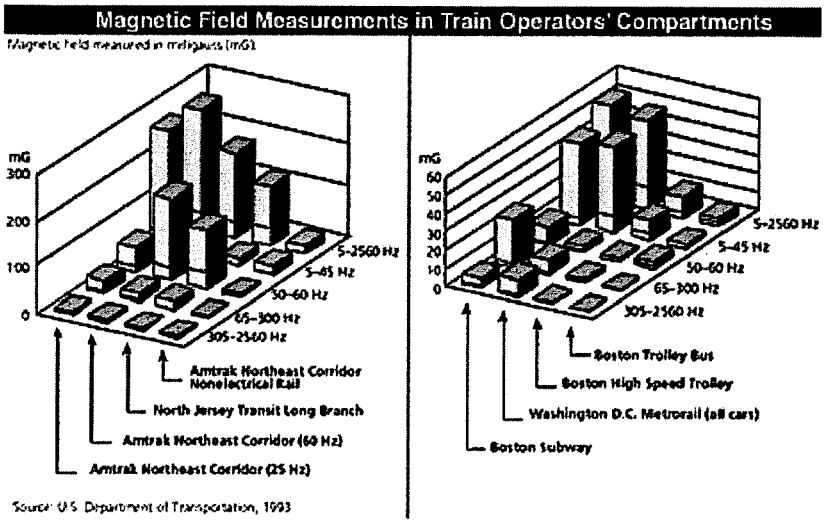
Q What EMF exposure occurs during travel?

A Inside a car or bus, the main sources of magnetic field exposure are those you pass by (or under) as you drive, such as power lines. Car batteries involve direct current (DC) rather than alternating current (AC). Alternators can create EMF, but at frequencies other than 60 Hz. The rotation of steel-belted tires is also a source of EMF.

Most trains in the United States are diesel powered. Some electrically powered trains operate on AC, such as the passenger trains between Washington, D.C. and New Haven, Connecticut. Measurements taken on these trains using personal exposure monitors have suggested that average 60-Hz magnetic field exposures for passengers and conductors may exceed 50 mG. A U.S. government-sponsored exposure assessment study of electric rail systems found average 60-Hz magnetic field levels in train operator compartments that ranged from 0.4 mG (Boston high speed trolley) to 31.1 mG (North Jersey transit). The graph below shows average and maximum magnetic field measurements in operator compartments of several electric rail systems. It illustrates that 60 Hz is one of several electromagnetic frequencies to which train operators are exposed.

Workers who maintain the tracks on electric rail lines, primarily in the northeastern United States, also have elevated magnetic field exposures at both 25 Hz and 60 Hz. Measurements taken by the National Institute for Occupational Safety and Health show that typical average daily exposures range from 3 to 18 mG, depending on how often trains pass the work site.

Rapid transit and light rail systems in the United States, such as the Washington D.C. Metro and the San Francisco Bay Area Rapid Transit, run on DC electricity. These DC-powered trains contain equipment that produces AC fields. For example, areas of strong AC magnetic fields have been measured on the Washington Metro close to the floor, during braking and acceleration, presumably near equipment located underneath the subway cars.



****Click Here to See Large Image****
These graphs illustrate that 60 Hz is one of several electromagnetic frequencies to which train operators are exposed. The maximum exposure is the top of the blue (upper) portion of the bar; the average exposure is the top of the red (lower) portion.

Q How can I find out how strong the EMF is where I live and work?

A The tables throughout this chapter can give you a general idea about magnetic field levels at home, for different jobs, and around various kinds of electrical equipment. For specific information about EMF from a particular power line, contact the utility that operates the line. Some will perform home EMF measurements.

You can take your own EMF measurements with a magnetic field meter. For a spot measurement to provide a useful estimate of your EMF exposure, it should be taken at a time of day and location when and where you are typically near the equipment. Keep in mind that the strength of a magnetic field drops off quickly with distance.

Independent technicians will conduct EMF measurements for a fee. Search the Internet under "EMF meters" or "EMF measurement." You should investigate the experience and qualifications of commercial firms, since governments do not standardize EMF measurements or certify measurement contractors.

At work, your plant safety officer, industrial hygienist, or other local safety official can be a good source of information. The National Institute for Occupational Safety and Health (NIOSH) sometimes conducts health hazard evaluations in workplaces where EMF is a suspected cause for concern. For further technical assistance, contact NIOSH at 800-356-4674.

Q How much do computers contribute to my EMF exposure?

A 

Personal computers themselves produce very little EMF. However, the video display terminal (VDT) or monitor provides some magnetic field exposure unless it is of the new flat-panel design. Conventional VDTs containing cathode ray tubes use magnetic fields to produce the image on the screen, and some emission of those magnetic fields is unavoidable. Unlike most other appliances which produce predominantly 60-Hz magnetic fields, VDTs emit magnetic fields in both the extremely low frequency (ELF) and very low frequency (VLF) frequency ranges. Many newer VDTs have been designed to minimize magnetic field emissions, and those identified as "TCO'99 compliant" meet a standard for low emissions.

Q What can be done to limit EMF exposure?

A Personal exposure to EMF depends on three things: the strength of the magnetic field sources in your environment, your distance from those sources, and the time you spend in the field.

If you are concerned about EMF exposure, your first step should be to find out where the major EMF sources are and move away from them or limit the time you spend near them. Magnetic fields from appliances decrease dramatically about an arm's length away from the source. In many cases, rearranging a bed, a chair, or a work area to increase your distance from an electrical panel or some other EMF source can reduce your EMF exposure.

Another way to reduce EMF exposure is to use equipment designed to have relatively low EMF emissions. Sometimes electrical wiring in a house or a building can be the source of strong magnetic field exposure. Incorrect wiring is a common source of higher-than-usual magnetic fields. Wiring problems are also worth correcting for safety reasons.

In its 1999 report to Congress, the National Institute of Environmental Health Sciences suggested that the power industry continue its current practice of siting power lines to reduce EMF exposures.

There are more costly actions, such as burying power lines, moving out of a home, or restricting the use of office space that may reduce exposures. Because scientists are still debating whether EMF is a hazard to health, it is not clear that the costs of such measures are warranted. Some EMF reduction measures may create other problems. For instance, compacting power lines reduces EMF but increases the danger of accidental electrocution for line workers.

We are not sure which aspects of the magnetic field exposure, if any, to reduce. Future research may reveal that EMF reduction measures based on today's limited understanding are inadequate or irrelevant. No action should be taken to reduce EMF exposure if it increases the risk of a known safety hazard.

On to EMF Exposure Standards

EMF Questions & Answers Home | Introduction | EMF Basics | Evaluating Potential Health Effects | Results of EMF Research | Your EMF Environment | EMF Exposure Standards | National and International EMF Reviews | References

EMF*RAPID* Home | NIEHS Home
For More Information About EMF: **Web Center**
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