



28 January 2011

WiFi Committee of School District 61
Victoria, British Columbia

Dear Sirs/Madams:

This is concerning potential adverse health effects associated with exposure to radiofrequency (RF) radiation, specifically that from wireless routers. I am a public health physician who has been involved in issues related to electromagnetic fields (EMFs) for a number of years. I served as the Executive Secretary for the New York Powerline Project in the 1980s, a program of research which showed that children living in homes with elevated magnetic fields coming from powerlines suffered from an elevated risk of developing leukemia. I have edited two books on effects of EMFs, including RF radiation. I served as the co-editor of the Bioinitiative Report (www.bioinitiative.org), a comprehensive review of the literature on this subject. The public health chapter from this report was subsequently published in a peer reviewed journal, and that is attached. Also I testified before the President's Cancer Panel on this subject in 2009, and a publication coming from that testimony is also attached. Thus this is a subject which I know well, and one on which I take a public health approach that has as a fundamental principle the need to protect against risk of disease even when one does not have all the information that would be desirable.

There is clear and strong evidence that intensive use of cell phones increases the risk of brain cancer, tumors of the auditory nerve and cancer of the parotid gland, the salivary gland in the cheek by the ear. The evidence for this conclusion is detailed in the attached publications. WiFi uses similar radiofrequency radiation (1.8 to 5.0 GHz), although the intensity of exposure in the immediate environment is much lower than what one gets from holding a cell phone close to your head. The difference between a cell phone and a WiFi environment, however, is that while the cell phone is used only intermittently a WiFi environment is continuous. In addition WiFi transmitters are indoors, where people (and in this case, children) may be very close to them. There is evidence from Scandinavian studies of cell phone usage that children who use cell phones are about five times more likely to develop brain cancer than if use starts as an adult. Thus it is especially important to protect children.

To my knowledge there has not been any health investigation of individuals living or working in WiFi environments as compared to others who are not. However, because the radiation is the same as those for cell phones, there is every reason to assume that the health effects would be the same, varying only in relation to the total dose of radiation. Wired facilities do not generate any RF radiation. While there is not specific proof that WiFi increases risk of cancer, there is certainly no evidence that it is safe. I urge you to not put WiFi in any school. Children should not be put at increased risk of developing cancer.

Yours sincerely,

David O. Carpenter, M.D.
Director, Institute for Health and the Environment
University at Albany

28 February 2011

Chairman and Trustees
Kawartha Pine Ridge District School Board
Education Centre
1994 Fisher Drive
Peterborough, Ontario K9J7A1

Dear Sirs/Madams:

This is concerning potential adverse health effects associated with exposure to radiofrequency (RF) radiation, specifically that from wireless routers. I am a public health physician who has been involved in issues related to electromagnetic fields (EMFs) for a number of years. I served as the Executive Secretary for the New York Powerline Project in the 1980s, a program of research which showed that children living in homes with elevated magnetic fields coming from powerlines suffered from an elevated risk of developing leukemia. I have edited two books on effects of EMFs, including RF radiation. I served as the co-editor of the Bioinitiative Report (www.bioinitiative.org), a comprehensive review of the literature on this subject. The public health chapter from this report was subsequently published in a peer reviewed journal, and that is attached. Also I testified before the President's Cancer Panel on this subject in 2009, and a publication coming from that testimony is also attached. Thus this is a subject which I know well, and one on which I take a public health approach that has as a fundamental principle the need to protect against risk of disease even when one does not have all the information that would be desirable.

There is clear and strong evidence that intensive use of cell phones increases the risk of brain cancer, tumors of the auditory nerve and cancer of the parotid gland, the salivary gland in the cheek by the ear. The evidence for this conclusion is detailed in the attached publications. WiFi uses similar radiofrequency radiation (1.8 to 5.0 GHz), although the intensity of exposure in the immediate environment is much lower than what one gets from holding a cell phone close to your head. The difference between a cell phone and a WiFi environment, however, is that while the cell phone is used only intermittently a WiFi environment is continuous. In addition WiFi transmitters are indoors, where people (and in this case, children) may be very close to them. There is evidence from Scandinavian studies of cell phone usage that children who use cell phones are about five times more likely to develop brain cancer than if use starts as an adult. Thus it is especially important to protect children.

To my knowledge there has not been any health investigation of individuals living or working in WiFi environments as compared to others who are not. However, because the radiation is the same as those for cell phones, there is every reason to assume that the health effects would be the same, varying only in relation to the total dose of radiation. Wired facilities do not generate any RF radiation. While there is not specific proof that WiFi increases risk of cancer, there is certainly no evidence that it is safe. I urge you to not put WiFi in any school. Children should not be put at increased risk of developing cancer.

Yours sincerely,



David O. Carpenter, M.D.
Director, Institute for Health and the Environment
University at Albany