

The Effect of Exposure to Electromagnetic Waves on Pregnancy

Thesis

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By

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Abstract:

Introduction: Several studies have looked into the safety of mobile phones in recent years with uncertain results. There is a growing body of evidence that exposure to high density microwaves can cause detrimental effects to the testis and eyes and induce significant biologic changes. The non-thermal effects of microwaves used in mobile phones has been controversial. There is no epidemiologic evidence today showing that occupational or daily life exposures to microwaves do any harm to human reproductive processes, but experimental animal studies have suggested that microwaves can produce intra-uterine effects including teratogenic effects.

Aim of the study: The present study aimed to assess the effect of electromagnetic waves of mobile phones on the fetal heart rate as well as fetal blood flow using the cardiotocography (CTG) monitoring and Doppler ultrasound evaluation.

Methodology: This prospective study included 90 pregnant females, 30 complicated with IUGR with mean gestational age of 34.6 ± 0.85 wks, and 60 with normal pregnancy with gestational age of 36.25 ± 0.75 wks. All patients included in the study were subjected proper full history taking, examination, CTG and Doppler examination.

Results: Results of the current study showed a significant decrease in fetal kicks in group A compared to group B after cell phone use. No significant difference between study groups regarding CTG variability, acceleration and deceleration was observed.

Conclusion: Our results indicated that electromagnetic fields (EMFs) do not cause any demonstrable effects on baseline FHR, acceleration or deceleration. However, our results showed significant lowering of fetal kicks after cell phone use in both IUGR and normal pregnancy groups

Key words: cardiotocography (CTG), Doppler, electromagnetic fields (EMFs), fetal heart rate (FHR), intra uterine growth restriction (IUGR).

List of Abbreviations

<i>AC</i>	Abdominal Circumference
<i>ACRBR</i>	Australian Centre for Radiofrequency Bioeffects Research
<i>AEDV</i>	Absence of end diastolic velocity
<i>AFI</i>	Amniotic fluid index
<i>AFV</i>	Amniotic fluid volume
<i>BPD</i>	Biparietal diameter
<i>CAI</i>	Color amplitude imaging
<i>CDE</i>	Color Doppler energy
<i>CTG</i>	Cardiotocogram
<i>CW</i>	Continuous wave
<i>DI</i>	Doppler index
<i>EFW</i>	Estimated fetal weight
<i>ELF</i>	Extremely low-frequency
<i>EMF</i>	Electromagnetic field
<i>FCC</i>	Federal Communications Commission
<i>FGR</i>	Fetal growth restriction
<i>FHR</i>	Fetal heart rate
<i>GA</i>	Gestational age
<i>HC</i>	Head circumference
<i>IARC</i>	International Agency for Research on Cancer
<i>IUGR</i>	Intrauterine Growth Restriction
<i>MCA</i>	Middle cerebral artery
<i>MFS</i>	Maximum frequency shift
<i>MI</i>	Mechanical Index

<i>MW</i>	Microwaves
<i>PI</i>	Pulsatility index
<i>PW</i>	Pulsed wave
<i>REDV</i>	Reversal of end diastolic velocity
<i>RF</i>	Radio frequency
<i>RFR</i>	Radiofrequency radiation
<i>RI</i>	Resistance index
<i>ROM</i>	Ruptured membranes
<i>SAR</i>	Specific Absorption Rate
<i>SCENIHR</i>	European Commission Scientific Committee on Emerging and Newly Identified Health Risks
<i>SGA</i>	Small for gestational age
<i>TCD</i>	Transverse cerebellar diameter
<i>TI</i>	Thermal Index
<i>U/S</i>	Ultrasound
<i>UA</i>	Umbilical artery
<i>2D</i>	Two-dimensional

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Introduction

Microwave ovens, satellites, and radio/TV transmission and mobile phone transmitters /receivers produce electromagnetic waves daily (***Khan M, 2008***).

As a matter of fact, we are exposed to electromagnetic waves apart from the occupational exposure with a frequency ranging from 300MHz to 300GHz (***Khan M, 2008***).

In addition, the common use of mobile phones has given rise to concerns about the potential influences of electromagnetic waves on human physiology (***Valberg PA, Van Deventer TE et al., 2007***).

Worldwide use of mobile phones had been increased by the end of 2008 to about 4.1 billion; these users involve pregnant women also (***Valberg PA, Van Deventer TE et al., 2007***).

Several studies have looked into the safety of mobile phones in recent years with uncertain results (***Valberg PA, Van Deventer TE et al., 2007***).

There is a growing body of evidence that exposure to high density microwaves can cause detrimental effects to the testis and eyes and induce significant biologic changes involving the central nervous system, cardiovascular system, and hematopoietic system through thermal action (***Valberg PA, Van Deventer TE et al., 2007***).

Meanwhile, the non-thermal effects of 915MHz microwaves used in mobile phones has been controversial (***Robert E, 1999***).

There is no epidemiologic evidence today showing that occupational or daily life exposures to microwaves do any harm to human.

There's experimental animal studies which have suggested that microwaves can produce intra-uterine effects including teratogenic effects (***Mazor R, Korenstein-Ilan A et al.,2008***).

THE AIM OF WORK

The present study aimed to assess the effect of electromagnetic waves of mobile phones on the fetal heart rate as well as fetal blood flow using the CTG monitoring and Doppler ultrasound evaluation.

Electromagnetic Radiation

- **Introduction**

The electromagnetic environment consists of natural radiation and man-made electromagnetic fields that are produced either intentionally or as by-products of the use of electrical devices and systems (*Alekseev and Ziskin, 2009*).

The natural electromagnetic environment originates from terrestrial and extraterrestrial sources such as electrical discharges in the earth's atmosphere and radiation from sun and space. Characteristic of natural fields is a very broadband spectrum where random high peak transients or bursts arise over the noise-like continuum background. This natural background is orders of magnitude below local field levels produced by man-made RF-sources considered here (*Bahr et al., 2006*).

The everyday use of devices and systems emitting radiofrequency (RF) electromagnetic fields is continuously increasing. Sources generating high levels of electromagnetic fields are typically found in medical applications and at certain workplaces (*Buccella et al., 2007*).

Cellular mobile communication networks cause on average low levels of electromagnetic fields in areas accessible to the general public. Handsets and cell phones, however, might cause significantly higher peak levels of exposure during use (*Calabrese et al., 2006*).

Electromagnetic radiation can be classified into two types: ionizing radiation and non-ionizing radiation, based on its capability of ionizing atoms and breaking chemical bonds. Ultraviolet and higher frequencies, such as X-rays or gamma rays are ionizing, and these pose

their own special hazards. By far the most common health hazard of radiation is sunburn, which causes over one million new skin cancers annually (Alekseev and Ziskin, 2009).

The non-ionizing radiation could be divided in terms of frequency to extremely low-frequency (ELF), radio frequency (RF) and microwaves (MW) frequencies (fig.1) (Krawczyk et al., 2008).

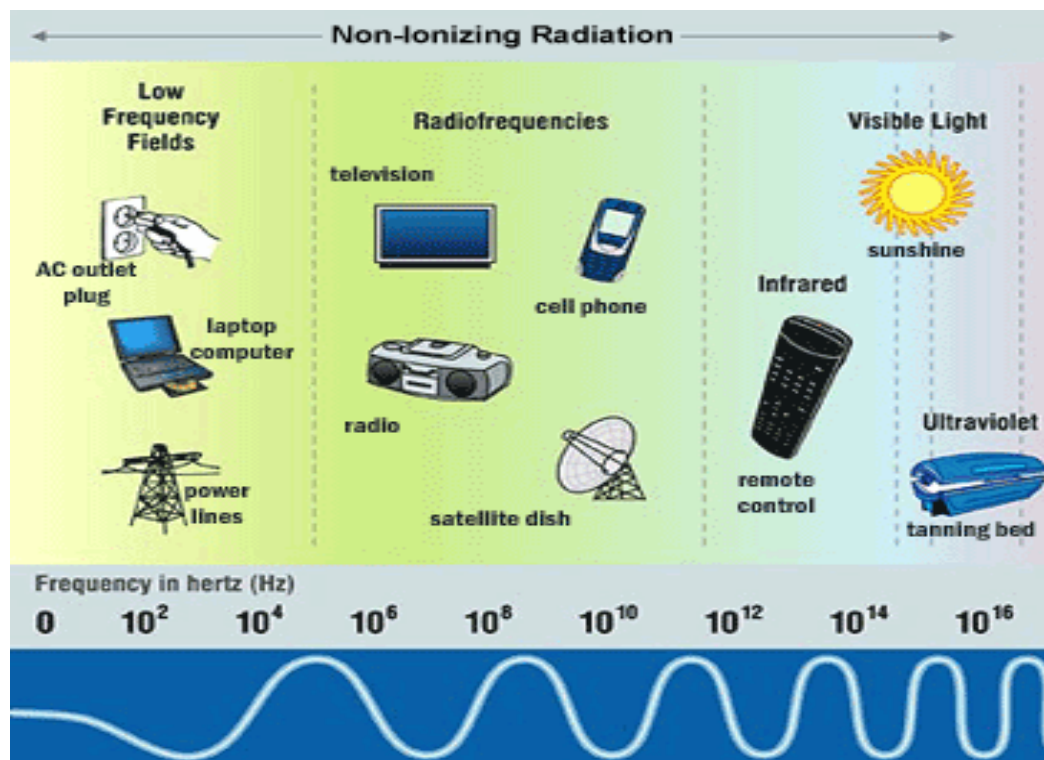


Figure (1): Types of non-ionizing radiation (Harper and Buress, 2008)

ELF radiation has very long wave lengths (on the order of a million meters or more) and frequencies in the range of 100 Hertz or cycles per second or less. While, radio frequencies have wave lengths of between 1 and 100 meters and frequencies in the range of 3 kHz to 300 MHz. However, the MWs have wavelengths ranging from as long as one meter to as short as one millimeter, or equivalently, with frequencies between 300 MHz and 300 GHz (Pozar, 1993).

Microwaves are good for transmitting information from one place to another, because microwave energy can penetrate haze, light rain and snow, clouds, and smoke. The MW is electromagnetic field (EMF), can be considered as a combination between an electric field and a magnetic field. The electrical part is produced by a voltage gradient and is measured in volts/meter. The magnetic part is generated by any flow of current and is measured in Tesla (**Krawczyk et al., 2008**).

The quantity used to measure how much EMF radiation is actually absorbed by the body is called the ***Specific Absorption Rate (SAR)***. The SAR is usually expressed in units of watts per kilogram (W/kg) or milliwatts per gram (mW/g) (**Harper and Buress, 2008**).

Radiation can affect the body in many ways, and the health effects may not become apparent for many years. These effects range from mild symptoms, such as skin reddening, to serious effects such as cancer and death. These effects are dependent upon the amount of radiation absorbed by the body (the dose), the type of radiation, whether or not the exposure was internal or external, and the length of exposed time (**Haddow et al., 2008**).

The body attempts to repair the radiation damage, but sometimes the damage is too severe or widespread. Lapses may also occur in the body's natural repair process in its attempt to compensate for the damage caused by radiation (**NCRP, 2007**).

- **Measurement**

Both narrow-band (frequency selective) and broad-band instruments can be used for assessing exposure to RF fields. In selecting instrumentation it is necessary to consider a number of key factors that