

RELEASED BY ARPANSA UNDER FOI JUNE 2018

















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## 2.11 Discussion paper on a process for review of the RF Standard

Dr Colin Roy, Manager of ARPANSA's NIR Branch, presented a paper proposing that a working group be established to assess whether the scientific basis underpinning ARPANSA RPS 3 is still current and whether the derivation of the exposure levels in the RF Standard is therefore still valid. Dr Roy informed the Committee that it was now more than five years since the RF Standard was published and ARPANSA had received a number of queries as to whether the RF Standard is still current. He advised the Committee that there had been several major international research programs and reviews and that the final report of the 13 country Interphone Study was expected in early 2008.

Dr Roy proposed that a small working group, comprising ARPANSA staff and a couple of external members, be established to undertake a preliminary assessment of the current science relevant to RPS 3. The Committee agreed to this proposal and asked for a report to be prepared for the March 2008 RHC meeting recommending whether a formal review of RPS 3 be undertaken. The timing of the report would, however, depend on the report of the Interphone Study.

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#### **2.4 RPS 3, RF Exposure Standard – review of current literature and updated risk assessment**

Dr Lindsay Martin, Acting Director of ARPANSA's Non-Ionizing Radiation Branch, informed the Committee of the progress on ARPANSA's review of the scientific literature related to radiofrequency (RF) electromagnetic radiation (EMR) and health. ARPANSA had commenced cataloguing and collecting copies of relevant primary research papers published since 2000 and had completed an internal review of the 167 epidemiological research papers. Dr Martin advised the Committee that ARPANSA intended to establish a small working group of experts to assess the collected literature, including the results of the multinational Interphone study. The working group would report to RHC in late 2010 or early 2011 on the results of the review and also on whether there will be a need to review or modify the Annexes in RPS 3. Dr Martin noted that regardless of the working group's recommendation, it was expected that the annexes of RPS 3 dealing with the scientific research would be updated to include 2000 - 2010 research and may be published separately, or incorporated into a revised RPS 3 if this was deemed necessary. Dr Martin mentioned that the International Agency for Research on Cancer (IARC) will be informing Member States of the Interphone study a week before publication and that the World Health Organisation (WHO) will publish a monograph on RF as part of the Environmental Health Criteria publication series.

**The Committee endorsed** the proposed plan of action and **asked Dr Martin** to seek further information on the “Radio Frequency Assisted Lipoplasty” procedure, which will be a session of the COSMETEX Conference to be held in Adelaide on 21-24 April 2010.

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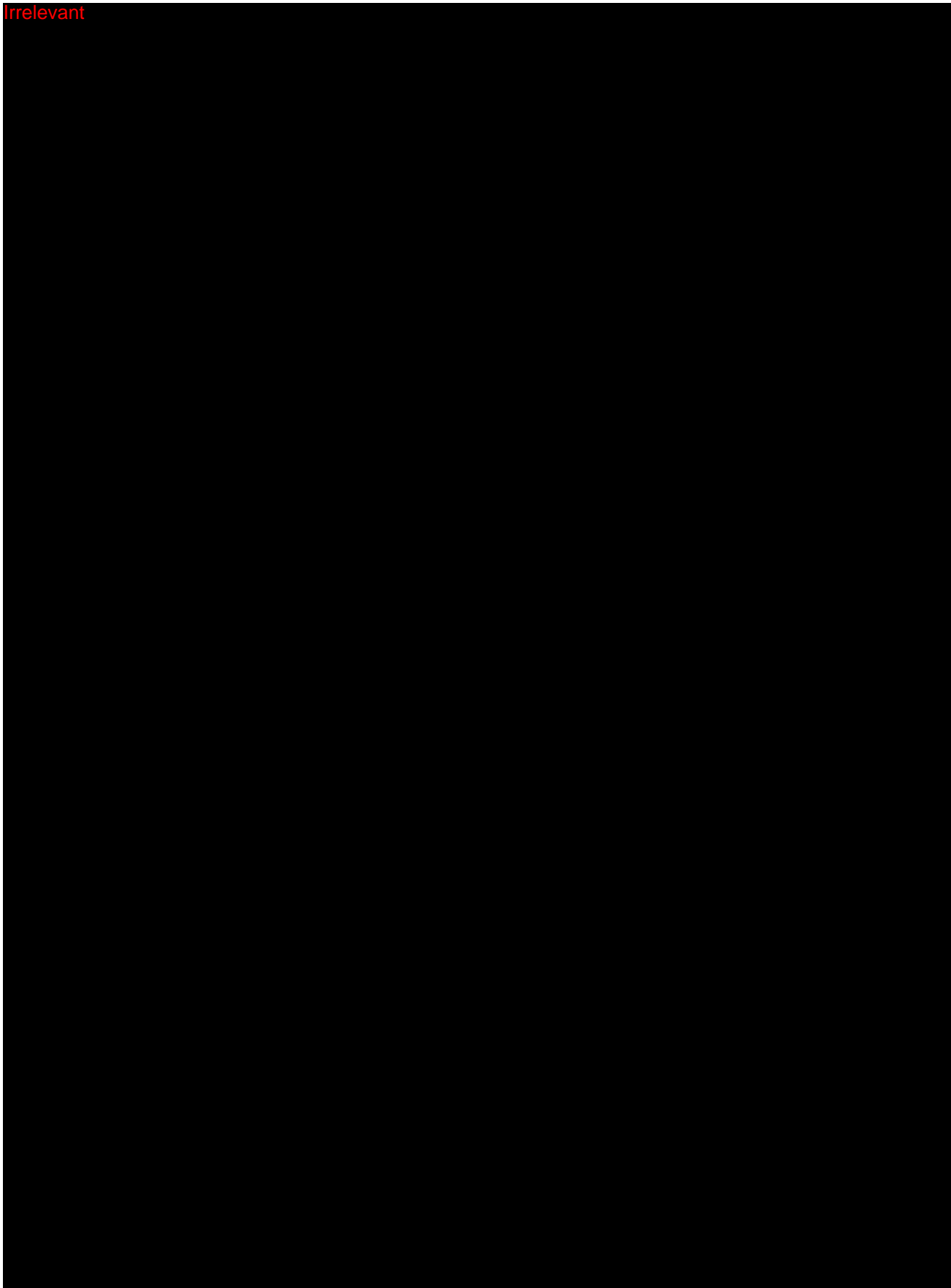








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### **3.4 RPS 3, RF Exposure Standard – update on assessment of current science**

Dr Lindsay Martin and Dr Ken Karipidis, of ARPANSA's NRP Branch, joined the meeting for discussion of this item. The Committee noted the information paper advising of the progress of,

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and future actions in relation to, ARPANSA's review of the scientific literature related to radiofrequency (RF) electromagnetic radiation (EMR) and health, including the results of the multinational Interphone Study. Dr Larsson informed the Committee that the ARPANSA media release on the Interphone Study continued to inform people on how to reduce their exposures and recommended that children not use mobile phones excessively. He noted that the results of the Interphone Study were conclusive and reassuring as they did not establish an increased risk of brain cancer with normal mobile phone use. He also noted that there was a lack of information concerning the long-term use of mobile phones.

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### **3.3 RPS 3, RF Exposure Standard – update on assessment of current science**

The Committee noted the information paper advising of the progress of, and future actions in relation to, ARPANSA's review of the scientific literature related to radiofrequency (RF) electromagnetic radiation (EMR) and health.

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## 2.9 Update on RF Literature Review

Dr Lindsay Martin, ARPANSA Radiation Health Services Branch, updated the Committee on the progress on ARPANSA's review of the scientific literature related to radiofrequency (RF) electromagnetic radiation (EMR) and health. He informed the Committee that ARPANSA had catalogued papers on RF and health that have been published since the year 2000 and now a small panel of experts was required to assist in finalising the review of the epidemiological and human provocation literature. International reviews would be looked at to ensure they were not contradictory. Dr Martin asked the Committee to consider the proposed terms of reference for the small expert panel.

**The Committee agreed** to the proposed terms of reference for establishing the panel to assess the collected literature and then report to the RHC on whether there will be a need to review or modify the annexes in ARPANSA RPS 3, *Radiation Protection Standard for Maximum Exposure Levels to Radiofrequency Fields - 3 kHz to 300 GHz* (2002). The panel was expected to finalise its report by 30 June 2012.

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## 8.2. ARPANSA RF literature review – presentation on draft report

Dr Solomon briefed Council on the background and findings of the RF literature review that had been completed by a small expert working group and thanked all the experts who had been involved in the review.

The outcomes of the expert review have been considered by ARPANSA and a strategy for addressing the review and updating the Radiation Protection Series No. 3 *Radiation Protection Standard for Maximum Exposure Levels to Radiofrequency Fields – 3 kHz to 300 GHz (2002)* (RPS3) is now being developed. ARPANSA's key findings were:

- The basic restrictions specified in RPS 3 are still valid for known effects;
- Advances in numerical dosimetry have demonstrated that the reference levels in certain situations are not as conservative as previously thought (for children/short statured adults in some frequency ranges). This is important in terms of telecommunications (far field – base station RF); and
- There is no immediate urgency to change RPS 3 but ARPANSA should consider the strategy for how these changes are addressed in the future, in line with the current revision being undertaken by ICNIRP.

Dr Ken Karipidis briefed Council on technical content of the review of epidemiological studies. Annex 3 of RPS 3 is a review of literature up to the year 2000. This current review examined studies from 2000 – 2012 and demonstrated there is still no conclusive evidence of a link between RF exposure and cancers.

Council discussed the presentations and agreed that health protection needs to be evidence based and closely following ICNIRP guidance may be the best way to have international best practice reflected into the Australia context. Council noted the follow up consultation that ARPANSA must undertake with key stakeholders prior to publishing the outcomes of the review on the website and agreed that when the review is published the accompanying public messaging needs to be very clear, as does ARPANSA's strategy for dealing with the outcomes of the review and how to reflect the update of ICNIRP in to RPS 3 as efficiently as possible.

Dr Larsson agreed the strategy will be very important and acknowledged there will be an expectation that the reference levels should be addressed quickly following its release.

Council agreed the Chair should write to the CEO recommending further discussion between ARPANSA, the DoHA and other key agencies to ensure a strategic approach is developed for dealing with the public concerns and prioritising research agendas related to RF and EMR exposures. Council agreed that adoption of the ICNIRP recommendations in an Australian context is important and that the priority in the short term is to deal with the update of the reference levels for children/short statured persons in RPS 3.

Ms Kidziak thanked all the presenters for their respective contributions and overview of the status of the RF and EMR research and the review of RPS 3.

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**Radiofrequency literature review**

The RF Literature Review Report has been completed. Adequate protection of the public is still provided by RPS3 but its complexity was noted. The Committee supported revision of the standard to a more simplified form.

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**Item 3.9 RF Research Report**

The Committee noted the draft report and acknowledged the contribution of the experts who worked on it.

The report concludes that RPS3 continues to provide an adequate level of protection to the public however the quantum of the safety factor has been reduced on the basis of improved knowledge. A proposal to revise RPS3 will be put to the next meeting. The Committee requested that, given his expertise in the area, Dr Andrew Kerans be approached to undertake the role of project manager for the revision project.

This subject is of significant public interest and explanatory material will be released with the RF Research Report later in March.

**ACTION 20: Approach Dr Kerans to undertake the role of Project Manager for the revision of RPS3 [KB/ARPANSA (NU)]**

**ACTION 21: Prepare PDP including a 21 Step Workplan for revision of RPS3 for June meeting [ARPANSA (RHS)]**



