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## A population-based case-control study of radiofrequency exposure in relation to childhood neoplasm.

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### Source

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### Abstract

This population-based case-control study in Taiwan considered incident cases aged 15 years or less and admitted in 2003 to 2007 for all neoplasm (ICD-9-CM: 140-239) (n=2606), including 939 leukemia and 394 brain neoplasm cases. Controls were randomly selected, with a case/control ratio of 1:30 and matched on year of birth, from all non-neoplasm children insured in the same year when the index case was admitted. Annual summarized power (ASP, watt-year) was calculated for each of the 71,185 mobile phone base stations (MPBS) in service between 1998 and 2007. Then, the annual power density (APD, watt-year/km<sup>2</sup>) of each township (n=367) was computed as a ratio of the total ASP of all MPBS in a township to the area of that particular township. Exposure of each study subject to radio frequency (RF) was indicated by the averaged APD within 5 years prior to the neoplasm diagnosis (cases) or July 1st of the year when the index case was admitted (controls) in the township where the subject lived. Unconditional logistic regression model with generalized estimation equation was employed to calculate the covariate-adjusted odds ratio [AOR] of childhood neoplasm in relation to RF exposure. A higher than median averaged APD (approximately 168 WYs/km<sup>2</sup>) was significantly associated with an increased AOR for all neoplasms (1.13; 1.01 to 1.28), but not for leukemia (1.23; 0.99 to 1.52) or brain neoplasm (1.14, 0.83 to 1.55). This study noted a significantly increased risk of all neoplasms in children with higher-than-median RF exposure to MPBS. The slightly elevated risk was seen for leukemia and brain neoplasm, but was not statistically significant. These results may occur due to several methodological limitations.

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