

**Electricity Act 1989-Section 37
Inquiries Procedure (Scotland) Rules 1997, as amended
Proposed Beauly to Denny 400kV transmission line.**

PRECOGNITION

on behalf of

STIRLING BEFORE PYLONS

**By Dr Richard Simpson MSP
with regard to**

LOCAL HEALTH CONCERNS

**To be presented at the Stirling area Session of the
Public Inquiry due to commence on 21st November 2007.**

As MSP for Mid Scotland and Fife which covers parts of this proposed line namely Kinbuck, Ashfield and Stirling, I am pleased to submit this summary of the evidential areas which I propose to cover in the hearing. I also make this submission as a medical doctor and as a resident in the area.

The proposed new overhead line will have a number of adverse effects upon this community. Other people will deal in more detail with the adverse visual, amenity and economic effects although I propose to mention one aspect. I will however largely concentrate on the growing body of evidence of the likely or potential health risks both to children and adults.

The proposed line has, I understand, already been altered to allow for the economic and amenity impact on the proposed new eastern villages. If this is acknowledged to be an appropriate change, then it should also be recognised that any adverse effect on the existing eastern villages is likewise totally unacceptable. These communities whose deprived status has historically been recognised by the attraction of European Objective Funding can ill afford to assume the additional burden that this proposal might place upon them.

The health issue is one where the evidence is changing with increasing rapidity. There is a clear parallel here with the history of passive smoking. In 1999 when the Scottish Parliament considered the first Bill to ban smoking the evidence was partial, equivocal and anecdotal. But within five years no one examining the evidence could deny the significant and serious effects. Similarly the effects of HVOTL EMF emissions would, ten years ago, have merited only further research. Now there is a growing body of evidence that gives rise to public health concerns.

I welcome the fact that, despite the initial rejection of the latest paper in the 'Bioinitiative' Report, the enquiry has now accepted its submission. This Review adds to the detailed examination of the issue by the Parliamentary Cross Party Inquiry into childhood leukaemia and ELF-EMF (July 2007). Whilst acknowledging that the enquiry will reach a point where no new

evidence can reasonably be accepted, this point had not been reached when this paper was first submitted.

The written submission includes the BMJ published Draper Report indicating a doubling of risk of childhood leukaemia for those within 100m but a 70% increase in risk up to 200m and a strengthening significant risk up to 600m. No subsequent evidence has significantly contradicted this authoritative report.

The paper by Lowenthal et al. in the Journal of International Medicine suggests a five fold increase in certain leukaemias and lymphomas and an increase in other cancers in children (0-5) who lived within 300 metres of lines.

The increasing weight of evidence is that ELF- EMF may affect children not only before and after birth expressed as childhood leukaemia but may also have an effect on their subsequent health as adults.

The suggestion in the Bioinitiative Report is that EMF may not only be carcinogenic and toxic to bone marrow but also neurotoxic. Whilst it must be acknowledged that the risks for the general population are small, nevertheless any additional unnecessary risks where the effect is potentially life threatening is unacceptable, particularly when there is a proposed new development. An increase in risk of 1.68 (95% C.I. =1.23-2.31) as reported in Greenland's meta-analysis on exposure to greater than 0.3 microtesla and Ahlbom's report of a risk rate of 2.0 (95% C.I.=1.27-3.13) in a meta-analysis on exposure of greater than 0.4 microtesla.

Childhood leukaemia is a survivable condition but there is some evidence of poorer long term survival in exposed cases. There remains some inconsistency and broader variation in the 95% confidence values for associations with Alzheimers disease and amyotrophic lateral sclerosis but evidence is also accumulating here.

It must be noted that public health concerns relate to the risk added over and above day to day risks which may accrue from other less preventable sources.

The questions which must be answered by this enquiry are:

- is there enough evidence for the precautionary principle to apply?
- will the applicants be prepared to fully compensate any family or individual affected since they have been fully appraised of the likely consequences of this construction?

There are three specific local groups who could be affected (as opposed to individual households):

- primary school children
- vulnerable adults (William Simpson Home, Plean) where a new care facility is proposed
- students in halls of residence.

Public health concerns in these densely populated sections of the line when added to amenity, visual and economic considerations require that the line should be constructed underground.