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1: [Int J Cancer](#). 2007 Jan 17; [Epub ahead of print]

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Mobile phone use and risk of glioma in 5 North European countries.

[Lahkola A](#), [Auvinen A](#), [Raitanen J](#), [Schoemaker MJ](#), [Christensen HC](#), [Feychting M](#), [Johansen C](#), [Klaeboe L](#), [Lonn S](#), [Swerdlow AJ](#), [Tynes T](#), [Salminen T](#).

STUK, Radiation and Nuclear Safety Authority, Helsinki, Finland.

Public concern has been expressed about the possible adverse health effects of mobile telephones, mainly related to intracranial tumors. We conducted a population-based case-control study to investigate the relationship between mobile phone use and risk of glioma among 1,522 glioma patients and 3,301 controls. We found no evidence of increased risk of glioma related to regular mobile phone use (odds ratio, OR = 0.78, 95% confidence interval, CI: 0.68, 0.91). No significant association was found across categories with duration of use, years since first use, cumulative number of calls or cumulative hours of use. When the linear trend was examined, the OR for cumulative hours of mobile phone use was 1.006 (1.002, 1.010) per 100 hr, but no such relationship was found for the years of use or the number of calls. We found no increased risks when analogue and digital phones were analyzed separately. For more than 10 years of mobile phone use reported on the side of the head where the tumor was located, an increased OR of borderline statistical significance (OR = 1.39, 95% CI 1.01, 1.92, p trend 0.04) was found, whereas similar use on the opposite side of the head resulted in an OR of 0.98 (95% CI 0.71, 1.37). Although our results overall do not indicate an increased risk of glioma in relation to mobile phone use, the possible risk in the most heavily exposed part of the brain with long-term use needs to be explored further before firm conclusions can be drawn. (c) 2006 Wiley-Liss, Inc.

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