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September 21, 2026

U.S. Department of Health and Human Services
Office of the Secretary
200 Independence Avenue, S.W.
Washington, D.C. 20201

Re: Health effects of wireless radiation, cell towers, and smart utility meters

Dear Secretary:

I am a resident of Hurricane, Washington County, Utah. I have been diagnosed with electromagnetic radiation (EMR) syndrome, also described as electromagnetic hypersensitivity. I write to request that the Department of Health and Human Services assess the health and safety of wireless infrastructure and of devices that place high-frequency voltage transients on building wiring, including smart utility meters; support independent, biologically based safety testing; and promote meaningful accommodations for people who cannot tolerate these exposures.

Personal Circumstances

It is critical that I limit exposure to electromagnetic radiation. My household uses a hardwired landline telephone and wired Ethernet. We have shielded our home with protective paint and other mitigation measures, at substantial cost. Even with those steps, I have become increasingly isolated in order to avoid exposures that I experience as medically serious.

My autoimmune problems have worsened. My symptoms include, but are not limited to, loss of balance, headaches, chest pain, anemia, elevated blood sugar, hypotension, increased heart rate, and insomnia. I have groceries and prescriptions delivered. A walk outside is often painful. Doctor and dentist visits are very difficult. Hospitals I have used have not provided low-exposure accommodations.

Smart Utility Meters

I opted out of the electric smart meter. I was charged $228 to do so and then paid $22 per month for the opt-out meter. That opt-out meter produced high levels of electromagnetic interference on the wiring in my house. Average readings exceeded 1,650 mV. To my knowledge, no biologically based pre-market safety testing of this equipment was conducted.

Hurricane City Power company did not measure the interference and did not respond for months to my request for an analog meter. When the meter was replaced with an analog meter, average interference readings fell to about 20 mV. The company then charged me $380 for the meter and required a $48 monthly reading fee.

Washington County Water Conservancy District Manager Ron Thompson refused to allow me to opt out of the “smart” water meter, despite a letter from my physician.

I have also measured radio frequency emissions from neighbors' meters reaching my property, as well as Wi-Fi from surrounding residences.

Other jurisdictions have begun to treat customer choice as a policy issue. Colorado's H.B. 25-1175, enacted in 2025, requires large investor-owned electric utilities to give residential customers advance notice before installing advanced metering infrastructure and to honor a request for a noncommunicating meter. The statute does not create an unlimited statewide ban on installation and does not cover water meters. I cite it only as an example of a notice-and-choice framework that remains unavailable to many utility customers, including water customers in my area. The bill is available at https://leg.colorado.gov/bills/hb25-1175.

Cell Tower Near My Home

A cell tower was placed next to my home on property owned by the Washington County Water Conservancy District, without notice to residents. There was no meaningful opportunity for public comment because residents were not notified. No environmental review was conducted. The tower is in the fall zone of a water tank and is close to residences.

The tower was originally approved for three antennas. Many additional antennas have since been added, including a 5G upgrade and antennas for an internet provider. There was again no environmental review for the 5G upgrade.

In 2009, a cell tower was approved—again without notice—within about 100 feet of my property and between two residential developments. No cellular service was provided for the next three years. In 2011, AT&T contracted to place cellular antennas on the tower. Additional antennas have been added or "upgraded" since then, including 5G service, without notice or review under the National Environmental Policy Act. Other internet providers have also been added.

Upon activation of service on this tower in 2013, radiation levels increased and the quality of cell service declined sharply. Before the nearby tower was activated, I had about four bars of reception. After activation, I often have no bars, and occasionally one bar. Many neighbors report the same problem.

This result is contrary to what residents expected. The previous nearest tower was about seven miles away. Because there were few obstructions, service at my location had been relatively good. Antennas on the new tower are directed toward the Hurricane Cliffs, which rise about 1,000 feet above our home. Reflected, out-of-phase signals can degrade service and can redirect scattered energy back toward the residential area.

I contacted the Federal Communications Commission. The agency showed no interest in measuring or testing the signals. Other, more remote sites were available and would have reduced reflection from the cliffs. When my husband and I asked an employee of the tower company why this site was chosen, the answer was economic: it was cheaper to build where electrical and road infrastructure already existed.

Some residents have been forced to install indoor small cells in their homes in order to obtain usable service. According to Verizon, coverage from such equipment can extend to multiple users. That radiation can reach neighboring properties.

Loss of Wired Service

Relying on landline DSL for internet and telephone service is no longer workable. CenturyLink is not maintaining the copper landline, and electromagnetic interference has made that line effectively useless. In a utilities easement near my home there are two radio frequency-emitting water meters, one radio frequency-emitting electric meter, a fiber-optic utilities box, and an electrical transformer. Their close proximity may be contributing to the landline interference.

Fiber-optic service is available, but it is owned by an internet provider rather than by Washington County, which limits competition. Fiber also does not support traditional alarm-line service in the same way, and the optical equipment at the premises does not function when household electricity fails.

Interference with Implanted Medical Devices

A friend who used our tennis court later received a pacemaker. After the implant, he could no longer play on the court because the pacemaker stopped working there. When he entered our shielded home, the pacemaker functioned again. This occurred twice. The American Heart Association notes that certain electrical and radio frequency sources can interfere with pacemakers and implantable cardioverter-defibrillators. See https://www.heart.org/en/health-topics/arrhythmia/prevention--treatment-of-arrhythmia/devices-that-may-interfere-with-icds-and-pacemakers.

My husband's grandchild, who has epilepsy, collapsed while playing on our tennis court.

My husband has an Inspire implant to treat sleep apnea. He is concerned that electrical and wireless interference could impair the device and, in turn, his breathing. Radio frequency levels at St. George Regional Hospital have been high enough that the Inspire implant did not work there. The manufacturer's materials discuss electromagnetic interference. See https://manuals.inspiresleep.com/.

Neighborhood Health Observations

I cannot prove that any individual illness was caused by the tower or by smart meters. I report the following because residents are frightened, some have moved or chosen not to build, and the pattern is why I ask the Department to investigate rather than leave the matter solely to the Federal Communications Commission.

Individuals have died, and several people have told me they believe their symptoms are related to the tower or to smart utility meters. A neighbor had prostate cancer that was not initially thought to be fatal. The disease progressed despite extensive treatment, and he died. I noticed a smart utility meter on the wall outside the bedroom where the head of his bed was placed.

The smart meters in our development are relatively high-powered because of large lot sizes of one acre or more. A neighbor died of a heart attack while walking along the road. Another neighbor had a heart attack while walking along the road. My late husband had a heart attack while walking along the road. Four other neighbors have had heart attacks. One neighbor who lived next to the cell tower had bowel cancer, was in remission, and later died of a pulmonary embolism. A neighbor allowed an internet provider to place an antenna on his home, over his office, to serve the surrounding area. He died of cancer. A woman who had been in remission from multiple myeloma came out of remission. Some residents have moved because of the tower. One decided not to build on their lot.

As I understand the occupancy of the development, there are 41 lots, of which about eight are vacant; about 33 homes; and about 22 full-time residences. Among those households I am aware of three cancer deaths, eight heart attacks, including three fatal heart attacks, and one suicide of a person suffering severe pain. These are community observations, not a controlled study.

My stepson and his wife lived in Magna, Utah, close to a cell tower. He died of stage 4 metastatic stomach cancer at age 54. His wife died shortly afterward.

The spread of wireless radiation has been life-altering for me. I cannot use my pool or tennis court, and I cannot enjoy a walk. I am struggling with repeated infections and an immune system that no longer functions as it should.

Requested Action

The Department should take responsibility for assessing the safety of wireless devices and of equipment that places high-frequency voltage transients onto building wiring, including smart utility meters. Existing federal exposure limits and siting practices have not answered the health questions raised by people in my situation.

I agree with the following recommendations of the International Commission on the Biological Effects of Electromagnetic Fields:

1. Update national exposure limits on wireless, power-frequency, and other non-ionizing electromagnetic fields to reflect current scientific evidence and to protect against biological effects.
2. Fund independent research on long-term, cumulative biological and health effects of non-ionizing electromagnetic fields.
3. Require independent pre-market safety testing and independent post-market surveillance for wireless and other electromagnetic-field-emitting devices.
4. Ensure compliance tests for cell phones and Wi-Fi devices reflect children’s physiology and real-world use, including direct body contact.
5. Halt introduction of new technologies until rigorous pre-market safety testing is performed.
6. Inform families about the scientific literature on health risks and about ways to reduce exposure from phones, wireless devices, electronics, and other sources of electromagnetic fields.
7. Adopt a risk-mitigation approach that reduces children’s daily exposure at home and school and limits their use of wireless devices.
8. Promote safer designs, including wired networks, low-emission equipment, and devices that minimize user exposure.
9. Establish low-electromagnetic-field spaces in schools as a priority.

I also ask the Department to support:

A. Non-punitive analog or noncommunicating meter options for customers with medical need, including water as well as electric service;

B. Meaningful public notice and health-focused review before cell towers are sited near homes or upgraded with additional antennas or 5G equipment;

C. Preservation and maintenance of wired telephone and internet options;

D. Low-electromagnetic-field accommodations in hospitals and clinics, especially for patients with implants or reported electromagnetic sensitivity; and

E. Coordination with the Federal Communications Commission that does not treat thermal exposure limits as the end of the health inquiry, consistent with the decision of the United States Court of Appeals for the District of Columbia Circuit in Environmental Health Trust v. FCC, available at https://www.fcc.gov/document/dc-circuit-decision-environmental-health-trust-v-fcc.

The proliferation of wireless infrastructure is, for me and for several of my neighbors, not a convenience issue. It is a housing, medical-access, and daily-function issue. I respectfully ask the Department to treat it as a matter of public health.

Respectfully submitted,

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