Cross-spectrally coherent ~10.5- and 21-year biological and physical cycles, magnetic storms and myocardial infarctions^{*}

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Abstract Magnetic storms trigger myocardial infarctions with mechanisms relating to heart rate variability. Solar cycle-to-solar cycle differences and solar cycle stage dependence shown herein may resolve prior controversy and serve to advocate coordinated worldwide systematically aligned biological and physical monitoring.

^{*} This paper was originally invited by the historian-geophysicist Wilfried SCHRöDER of Bremen, Germany, for his biographical "Encounters," and is to serve as an update on the project on the BIOsphere and the Cosmos (BIOCOS) and its offspring ICEHRV (Dr. Kuniaki Otsuka's International Chronome Ecologic Study of Heart Rate Variability). It is intended for distribution at a NATO conference on space weather hazards, organized by Dr. Ioannis Daglis, June 18–29, 2000.

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Chronoastrobiology

Wolf's relative sunspot numbers (WN), long known to undergo ~10.5- (circadecennian) and ~21-year (circavigintunennian) cycles, named after Schwabe and Hale, respectively, have near-matching numerical biological counterparts. About half-yearly, about-weekly and, in certain solar cycle stages, about half-weekly features of anthropogenically unpolluted geomagnetic indices, such as Kp or aa, also have biological nearmatches. Rhythms with various frequencies coexist with chaotic changes and trends in temporal structures, the chronomes of variables in us and around us. Rhythmic elements of biological chronomes with a common genetic origin (in the sense of a classical homology) may also have a common environmental cycle, responsible for their genetic coding in the first place. We postulate a broad physico-biological homology, as compared to the classical homology implying only a common genetic origin; we extend it to our make-up in time, as done conventionally with respect to a spatial morphology which leads to several rules of procedure. A physical near-match in our environment may be sought to each built-in biological rhythm; a biological circa-match may eventually correspond to each physical environmental rhythm; a third possibility, a biological rhythm with a missing natural environmental near-match, impossible to definitively prove, may be a challenge posed by an internal evolution.

The biological week, free-running from the social one, seemed to be a case in point; eventually, we found a weak near-match of 6.75 days in over half a century's data on K_p, now confirmed by physicists and extended by them to data covering over a century of data on aa. The about-weekly biological component's origin may nonetheless be in part the result of an integrative evolution, of a consensus *partium in tempore*: in its genesis, perhaps away from the daily alternation of light and darkness, requirements internal to an organism prevailed, perhaps at the bottom of a sea if not on another planet, to look into a weak weekly geomagnetic component, nearest to these internal needs, e.g., for growth and repair by processes that took several days. It also seems possible that the prominent weekly component in newborns of several species may recapitulate, as a living fossil, the scenario of billions of years ago, when natural physical environmental factors exhibited a much more prominent environmental week than can be found today. The two possibilities are not mutually exclusive. Complementarity characterizes an internal integrative and an external adaptive evolution.

Eight-hour rhythms at this time have no external near-match. Dynamic features of the physical environment in organisms provide information of interest to physicists. In this context, the slow motion of the ontogeny of multicellular organisms may yield information not available from prokaryotes and may be telescoped into an excessively condensed lifespan, even in unicellular eukaryotes.

Introduction

Like circadian and circannual rhythms, other bioperiodicities may also be associated with positive adjustment value and timing according to them can make the difference between survival and death. This point is considered for a circadecennian rhythm in human myocardial infarctions. Evidence from spectra and from cross-spectral coherence, the latter less unspecific than product-moment correlations, is strengthened in some cases (such as myocardial infarctions or microbial sectoring) by superposed epoch analysis, and by other remove-and-replace approaches. Some results are further safeguarded by pseudoepochs, equivalent to blanks in chemistry. These methods reveal biomedical associations of non-photic solar activity, triggering magnetic storms in space that are known to displace the flux of galactic cosmic rays. Storms and/or cosmic rays, directly or via other natural physical environmental factors (NPEF), trigger fatal myocardial infarctions on earth, by mechanisms involving heart rate variability, among other physiological endpoints.

Anthropometric morphological variables influenced by helio- and geomagnetics, are neonatal body weight, body length and head circumference, insofar as they undergo cycles of similar length, as does non-photic solar activity, and, as a further hint, they also show cross-spectral coherence with geomagnetic indices. A spectrum of rhythms in natural physical variables is shown on the left of Figure 1, and the spectrum of biological rhythms is shown on the right of the same figure. Some biological components correspond as nearmatches to physical environmental cycles with different frequencies, characterized as different physical kinds, here subdivided roughly into photic and nonphotic.

The amplitude (A) of these components gauges the extent of predictable change with a given frequency. The As associated with a presumed biological near-match of a non-photic environmental cycle such as one of ~ 21 or \sim 10.5 years, can be part of a ratio (in the numerator), being referred to the amplitude of a photic cycle, such as a biological day or year (in the denominator). These A ratios may then represent gauges of the relative importance of photic and non-photic solar effects in biota. Along this line of thought, the amplitude of cycles regarded primarily as geophysical signatures, in the numerator of amplitude ratios, may then reflect the relative roles of geomagnetics and more broadly of NPEF. We assemble evidence to advocate global tests of any cyclic influences by NPEF on biota and the importance of a long-term coordinated physiological, archival and physical monitoring, not only for detecting further natural environmental effects on human and other life on

earth, but also to examine the mechanisms of these effects and on this basis to develop countermeasures.

Archival monitoring with the analysis of time structures, chronomes, would become feasible at a relatively modest cost if all state health departments could provide for analysis by interested parties the records that most or many of them already collect. Improvements can be anticipated if data collection would be time-coded electronically in an internationally standardized way, while the recording itself, notably of natality, morbidity and mortality, whenever possible, is refined by including clock-hour and -minute. Physiological monitoring for scientific, broadly ecological purposes, currently opportunistic, could be systematized and coordinated with physical monitoring. The aligned physiological, morphological and pathological records, properly and accessibly archived, will serve epidemiologists and also physicists, once they are documented not only as sensitive but also as more or less specific radiation detectors that respond in a different way to various NPEF. The monitoring of vital functions will contribute to the individual's and thus to the community's health by detecting any risks, e.g., of vascular diseases such as strokes and myocardial infarctions, associated with NPEF. Eventually, countermeasures will have to be identified, notably for those who are about to venture to sites away from hospitals, such as certain polar regions and space. Once preventive measures are developed, a preferably automatic system of screening and acting upon detection of an enhanced risk is desirable.

Assessing ~10.5- and ~21-y rhythms: Focus on chronomes enlarges scope and reduces error

Problems at the interface of meteorology or geophysics with biology are often approached by ignoring rhythms, allowing these rhythms (if unassessed) to inflate a noise term. When assessed, the rhythms do more than deflate the noise term; by their characteristics, they reveal the critical, since predictable and important elements of broader time structures, the chronomes. Chronomes consist of rhythms, chaos and trends, and represent and quantify the physical and/or biological dynamics in and around us [1, 2].

The assumption that certain rhythms have anthropogenous components [3] is warranted, but there can be and are other natural physical rhythms as well. Unwarranted is, for instance, the view that about-weekly rhythms are purely social effects, to the point that natural near-weekly changes are not explored, e.g., in magnetic disturbance. Indeed, in a given setting, a precise weekly component may be present in both a physiological and social and further in a physical variable. But even this situation does not imply that geomagnetic disturbance or physiology each has *only* an anthropogenic precise 7-day component, a common assumption that must be tested, rather than a priori generalized. Prompted by biological concerns, a 6.75-day component

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was found to characterize the spectrum of over a half century's data on the geomagnetic disturbance index K_n [4]. This finding was confirmed and refined by the physicists Olson and Roederer for K_p [5] and extended, again by physicists, to data covering over a century on the related index aa [6]. Rather than focusing on one or a few anticipated rhythms, such as about 24-hour or aboutyearly changes, when the data are dense and long enough in any one variable, it seems best to examine the whole chronome (chaos and trends as well as rhythms). For the rhythmic element of these structures, the spectrum that is assessable with the available density and length of a given observation span, may reveal previously not mapped candidate components. These in their turn can be examined in other series to see whether they can be confirmed. If so, they constitute validated evidence that justifies their anticipation in physics [4-6] or biology [1, 2, 4, 7].

Other instances are the most meritorious discoveries by reference to secularity, i.e., to variability along the scale of several years or even decades [8, 9]. In analyzing a time series of 20 years in the third millennium, it becomes possible for certain variables to anticipate about 10.5- and ~21-year rhythms, again not only in physics but also in biology [10–18], and to examine the validity of these rhythms by tests of the zero-amplitude assumption [2]. When the "no-rhythm" assumption is rejected (in keeping with a rhythm), one can next examine any differences, e.g., in period, between natural environmental variables and the biological series. Grave errors can thus be avoided, for instance in a middle-aged adult man whose 17-ketosteroid excretion can decline over several years. For the next several years, however, the excretion of these hormonal metabolites increases as part of a circadecennian rhythm, rather than as a function of an irreversible change with age [1]. Once the about 10-yearly change is mapped, it can be anticipated.

The cycle length itself in biological data series can be a signature of geomagnetics and may prompt focus on heretofore ignored effects. The extent of the effect can then be compared with the role of photic effects in the amplitude ratios discussed above. The risk of drawing incomplete, if not unjustified conclusions is particularly true when one deals with very wobbly sunspot activity, notorious for variability, but standing out nonetheless as recurrent in approximately 10.5- and 21-yearly cycles. By 1843, Samuel Heinrich Schwabe [19] recognized the importance of about 10.5-yearly (circadecennian) periodicities in solar activity, and George Ellery Hale [20] did likewise for about 21-yearly (circavigintunennian) rhythms in the early 20th century.

Cycles were deemed to be unimportant or were altogether missed by Galileo and others who started using telescopes, such as Scheinert, Fabricius and Harriot. Both in physics and biology, rhythms are still regarded as no more than confounders by many contemporary scientists. Very meritorious contributions with the best of methods [21, 22], however, eventually need to assess more than a full cycle, when, for instance, they consider the role of solar activity in relation to myocardial infarctions and to the field of heliobiology as a whole. Unjustified conclusions may be drawn, notably in studies of aging [1]. For solar effects on biota, maps need to be prepared of nearmatches of heliogeomagnetic signatures, e.g., of aboutweekly, about-half-yearly, about-10.5-yearly and about 21-yearly cycles, not only to deflate noise and clarify controversy, but in order to proceed eventually from temporal relations, on their basis, to the study of causal factors.

Premature extrapolation from data covering less than a solar cycle

We here consider the issue of deleterious (pathologic) and of other morphologic and physiological effects of magnetic storms by new and earlier analyses on data from Minnesota and elsewhere. We do so although, at least for the USA, the earlier claims by German [23, 24] and Russian [25–27] investigators had been refuted and heliobiology or cosmobiology had seemingly been laid to rest.

Mortality from all causes, from coronary heart disease, and from stroke in the US was studied in relation to solar activity as measured by the geomagnetic index, A_p , on a daily basis for the years 1964–66 and on a monthly basis for the years 1964–71. The data did not support previous assertions by Soviet researchers of an association between solar activity and cardiovascular mortality. [21]

One year later, Belinda Lipa et al. [22] complemented the foregoing summary, based on 8 years of data, with a study that also failed to support earlier findings or the proposal for a new branch of science, heliobiology. After summarizing 5 years of U.S. data, Lipa et al. added, very appropriately, that "it will be necessary to determine whether it [any association] is sensitive to geographical location, to phase of the solar cycle or to some other parameter which might distinguish the samples we have analyzed from those of the Soviet scientists" [22]. Indeed, we can here show for Minnesota that the solar cycle stage and solar cycle number are important parameters in a given geographic area, as revealed by the study of the time structure or chronome of time series covering several solar cycles [9–18].

Since the report by Lipa et al. [22], Russian scientists [28–30; cf. 31] have added further data, eventually doing so in cooperation with us [4, 32, 33]. Meanwhile, in the U.S., what has now become formal astrobiology [34–47] in the footsteps of G.A. Tikhov [48] had largely neglected any testable effects of geomagnetics, and ignored studies in the 1960s by the late Frank A. Brown Jr. [49, 50] and by Franklin H. Barnwell [51], as well as studies of the broader chronomes, encountered both in and around us [1, 2, 4].

Brown and Barnwell reported "subtle" effects of very weak geophysical forces and postulated that biological rhythms are externally timed by periodisms of natural geophysical frequencies, even in the organism kept in constant temperature and illumination. Brown concludes his contribution in 1965:

Whether or not, however, the extrinsic biological variations prove to be still sought timers of the circadian rhythms, they comprise a real element in the variations of terrestrial animals and plants. They are without question steadily contributing to the variations in the organisms, whether the latter are in the controlled constancy of the laboratory or are free in their natural habitats. [50]

Brown discussed biological time measurements first and foremost, but the foregoing statement brings his line of thought very close to a broader view of time structure. His proposal of autophasing is also very close to the free-running introduced with Earl E. Bakken [52] to be discussed below. Free-running helped to focus on a genetic component of rhythms, while Brown's "autophasing" argument [49, 50; see also 53, 54] may apply more appropriately to about-weekly or circaseptan rhythms among others related, perhaps, to the periodicities of the sun and moon, some of which are multiples or submultiples of several days, the multiseptans. Regrettably, Brown, an eminent physiologist, was attacked ad hominem¹ on general technical [55] and statistical [56] grounds by investigators who themselves mostly refrained from examining the actually criticized data by the results of inferential statistical meta-analyses, corrected for multiple testing. Instead, findings on "unicorns" served to remind the reader of Slutsky's important caveat, now a truism for the initiated, that spurious periodicities can occur [57].

Scenario by implication: magnetic storms are not mentioned as a health hazard

At this time, magazine headlines [58; cf. 59] report that stormy weather in extraterrestrial space blacks out within 8 minutes radio transmissions by ultraviolet and X rays travelling at the speed of light; threaten, within half an hour, by highly energetic particles, satellites and high-flying jets such as the Concorde; and within 2–4 days endanger power grids by masses of solar particles shaking the earth's magnetic field. NATO symposia rightly focus on such potential hazards mainly from the viewpoint of physics this year [60]. It is to Juan Roederer's credit [5], as a transdisciplinary physicist [61], that he aligned biological with biophysical spectra

[62, 63], persuaded to look into this field by Tamara Breus [64]. Elena V. Syutkina [65], in turn, assembled a special session of an academy of medical sciences to endorse the biomedical relevance of coordinated mapping of biological and of NPEF chronomes. Beyond including a report on storms in space into routine weather reports, because they are health hazards, the chronome mapping is essential for basic biology and physics, and it is within the very scope of those who identify astrobiology solely as a concern with the origins of terrestrial and any extraterrestrial life [47]. Medically, the genetically encoded but environmentally influenced rhythms are the basis for self-help in health care on earth and more so in extraterrestrial space, since they allow detection of earliest abnormality that occurs within the otherwise neglected range of everyday physiology [1, 2]. A transdisciplinary meeting toward this goal, to be held next year, is being arranged by Tamara Breus with Ioannis Daglis [68] and its scope for the broader public which may indeed benefit from a space weather report, would be much broader in applied and basic science as well.

How about biohazards?

Some biological associations of indices used in space and earth physics are summarized in Table 1. One series available for analysis covers a span of ten Schwabe or five Hale cycles, Figure 2, as the first entry in Table 1. The time span covered by the data is less in other entries. It must be remembered that, e.g., in anthropometric population statistics, one does not deal with a single 21-year cycle in data covering 21 years of body lengths of millions of newborns. Behavior over a single cycle usually depends, rather than on a single extreme individual, on the physiology of a population as a whole. The "single" 21-year population cycle may thus signify that a majority of individuals have similarly timed physiology, contributing consistent data to the rhythm of the population. If so, the argument that one cannot speak of (repetitive) rhythms when a population series barely covers one or a few cycles has to be qualified along this line of thought, notably if the series does not have outliers.

Reinforced by this consideration, several lines of solid evidence based on data from large populations are in hand to advocate the existence of a critical mass of information in a budding chronoastrobiology. Population statistics on samples of millions of cases suggest some degree of generality for what is also seen in a scientist measuring a dozen physiological variables on himself longitudinally, about 5 times a day on the average, for over 3 decades, or in a physician who measured his blood pressure and heart rate automatically, with very few interruptions, every half-hour for 13 years, and

¹By innuendo, e.g., by associating a "fabulous animal possibly based on faulty descriptions of the rhinoceros," the unicorn, with reference not only to intact mammals, "but to slices of living vegetables," a clear reference to potatoes studied by Brown [53, 54].





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	Table 1. B	3iomedicine, solar activit	y and terrestri	al magnetism:	inferential statistical analyses¶	
Study (reference) Design* Variable(s)*	Location (latitude [geographic/geomagnetic],	Population Sample Size Age (years)	<i>Sam</i> span	<i>pling</i> interval	Resu Spectral components	<i>ults</i> * Cross-spectral <u>coherence</u> (frequency) [period]
	I. Data longitudi	nally covering up to 10 S	chwabe (about	: 10.5-year) cy	cles on height and other morpholog	<u> भ्रता</u> य
1. Weber et al. [1] T BH	Austria (49.02°N/48.57 [north- ernmost]-46.27°N/46.08 [southernmost])	Male recruits 507,125 18	10 years	monthly	After detrending (linearly): about 10-yearly component modulating circannual variation	With Kp: 0.813 (2.20 year ⁻¹) [5.45 months] With sunshine: 0.545 (1.90 year ⁻¹) [6.32 months] 0.963 (0.90 year ⁻¹) [13.33 months] (using 22 degrees of freedom)
2. Weber et al. [2] T BH	Austria (49.02°N/48.57 [north- ernmost]-46.27°N/46.08 [southernmost])	Male recruits 713,162 18	14 years	yearly	After detrending (linearly): common about 9.25-year component consis- tent among recruits from 8 separate socio-economic strata	
3. Nikityuk (3, 4; u.p.†) T i. BH; BW; HC ii. CC; AC	Moscow, Russia (55.45°N/50.76)	Russian babies 25–150/year Birth	i. 112 years ii. 41 years	yearly	About 10.5- and/or 21-year cycles	BH with Kp: <u>0.819</u> (0.143 year ⁻¹) [6.99 years] BW with Kp: <u>0.867</u> (0.143 year ⁻¹) [6.99 years] (using 10 degrees of freedom)
4. Nikityuk (3, 4; u.p.†) T BH; BW; HC; CC; AC	Alma-Ata, Kazakhstan (43.19°N/33.67)	Russian and Kazakh babies 25–150/year Birth	40 years	yearly	About 10.5- and 21-year cycles with common characteristics for different endpoints	
5. Cornélissen [3, 4; u.p.†] BW	Minnesota (45.00°N/55.00)	Newborns 2,150,122 Birth	33 years	yearly	About 21-year cycle	
6. Otto et al. [5] T BH; BW	Germany: Berlin (52.31°N/52.06) & Leipzig (51.20°N/51.19)	Newborns 574,600 Birth	1959; 1961; 1963; 1964	monthly	About-yearly and half-yearly changes	
7. Henneberg and Louw [6] BH; BW (z-score)	South Africa (33.56°S/-32.70)	Impoverished rural schoolchildren 1,522 6–18	1 year	monthly	About-yearly change in BW and half- yearly variation in BH	
8. Garcia et al. [7, 8] H BH; BW	La Coruña, Spain (43.22°N/47.40)	Newborns 674 Birth	0-16 months	about-monthly	About-yearly and half-yearly compo- nents, more prominent by reference to the time of birth, i.e., as a partly endoi enous function of age, than by referenc to a fixed calendar date, i.e., as a func- tion of exogenous factors such as sun- light, temperature and nutrition	р. 2011 - 1

Study (reference) Design* Variable(s) *	Location (latitude [geographic/geomagnetic])	Population Sample Size Age (years)	<i>Samp</i> span	<i>ling</i> interval	Res Spectral components	ults* Cross-spectral <u>coherence</u> (frequency) [period]
		II. Su	pportive evidence	e on human pa	ıthology	
9. Cornélissen et al. [9] T incidence	Worldwide	Morbidity 6,304,025 (largest only) Various ages	meta-analysis of 47 studies		About-weekly and half-weekly pat- terns of incidence of cardiovascular morbid events	
10. Halberg et al. [10] T incidence	Moscow, Russia (55.45°N/50.76)	Morbidity 6,304,025 Various ages	3 years	daily	About-yearly incidence of cardiovas- cular morbid events and half-yearly pattern of incidence of epileptic attacks	MI with Kp: <u>0.51</u> (0.315 day ⁻¹) [3.17 days] MI with Bz: <u>0.58</u> (0.315 day ⁻¹) [3.17 days] (using 25 degrees of freedom)
11. Düll and Düll [11] T morbid events	Copenhagen, Denmark (55.43°N/55.19)	Adults 36,000 Various ages	5 years	daily	Maximal cross-correlation between ma lag on data summarized by superimpos geomagnetic disturbance ("electron in	inetic storms and mortality at 1-day ed epochs in relation to peaks in 'asion")
12. Faraone et al. [12] T sectoring in colonies of microorganisms	Milan & Rome, Italy (45.28°N/46.31 & 41.53°N/41.89)	Colonies of air bacteria and <i>Staphylococ-cus aureus</i> 200–250/day	12.5 (air) and 7 (staph) years	daily	Prominent components resembling time structure of Kp and WN, notably with periods of about 5 and 0.5 years	Air bacteria with Dst: 0.647 (0.054 day ⁻¹ [18.6 days]) Staph with Kp: 0.700 (2.262 year ⁻¹ [0.442 year]) and 0.660 (0.303 day ⁻¹ [3.3 days], using 20 degrees of freedom)
		III. Su	pportive evidence	e on human pł	ıysiology	
13. Portela et al. [13] L BP	USA (45.00°N/55.00; 45.33°N/51.42; 42.19°N/ 53.20)	Adult males 3 20; 65; 71	14; 15; 26 years	5-6/day; 2/day; about-weekly	About 11-year cycles paralleling solar activity	
14. Cornélissen et al. [14] HR	USA (45.00°N/55.00 [2]; 41.18°N/52.19; 34.00°N/ 41.01; 47.17°N; 47.53)	Adults 5 28–81	5 selected spans between Aug 1967 and Apr 1975	1-6/day (N: 382-2840)	About 11.6-year cycle; remove-and- replace approach showing resonance o about 7-day component with correspor ing variation in solar activity. When th sun "removes" an about 7-day compo- nent from the spectrum of its velocity changes, the circaseptan HR amplitude smaller.	р. а
15. Baevsky et al. [15] H HR	Space (Soyuz spacecraft)	Russian cosmonauts 49 25–50	2-15 min	beat-to-beat	About 30% reduction in HR variability intervals) during magnetic storms vs. c	(gauged by standard deviation of R-R uiet days in extraterrestrial space

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			Table	1		
Study (reference) Design* Variable(s) *	Location (latitude [geographic/geomagnetic])	Population Sample Size Age (years)	<i>Sam</i>) span	oling interval	<i>Res</i> Spectral components	sults* Cross-spectral <u>coherence</u> (frequency) [period]
	I. Data longitudin	ally covering up to 10	Schwabe (about	10.5-year) cy	cles on height and other morpholoc	gy¶¶
16. Syutkina et al. [16] H BP; HR	Moscow, Russia (55.45°N/50.76)	Newborns 32 First month of life	up to 20 days	15 min	Correlation between nonlinearly- determined period of about 7-day component of BP and HR vs. local magnetic disturbance (K)	With K: <u>>0.70</u> (around 0.3 day ⁻¹ and around 0.14 hour ⁻¹) [3.33 days and 8.77 hours] (using 10 degrees of freedom)
17. Halberg et al. [10] L BP; HR; blood pH	Minneapolis, Minnesota, USA (44.59°N/54.60)	Premature baby 1 Birth	up to 26 months	up to 1–5/day; denser at outset	Near-match of some spectral peaks of BP and HR vs. Kp	DBP with Bz: 0.74 (2.0 week ⁻¹) [3.5 days] (using 14 degrees of freedom)
18. Halberg et al. [17; u.p.†] L BP; HR	Ancona, Italy (43.37°N/ 43.48)	Adult woman 1 28	1 year (267 days in isolation from society)	15-30 min	Closeness of nonlinearly-determined period of about-half-weekly compo- nent of HR vs. Kp during isolation	HR: -with Kp: -with Kp: 0.558 (0.045 hour ⁻¹) [22.22 hours] -with CR: 0.524 (0.138 hour ⁻¹) [7.25 hours] -with $3h$ CR-SD: 0.546 (0.153 hour ⁻¹) [6.54 hours] (using 22 degrees of freedom)
19. Watanabe et al. [18] L BP; HR	Tokyo, Japan (35.42°N/25.75)	Adult man 1 35 (at start)	3 years	15-30 min		With Kp: <u>>0.5</u> (0.036 day ⁻¹) [27.8 days] (us- ing 26 degrees of freedom)
20. Watanabe [3, 19; u.p.†] L BP; HR	Tokyo, Japan (35.42°N/25.75)	Adult man 1 35 (at start)	11 years	15–30min monthly summary	About 10.5-year component in mean and SD of HR and in SD of SBP	HR with WN: <u>0.664 (</u> 1.636 year ⁻¹) [7.33 months] (using 14 degrees of freedom)
21. Halberg et al. [10] L BP; HR	Minneapolis, Minnesota, USA (44.59°N/54.60)	Adult man 1 68 (at start)	4 years (with interruptions)	15-30 min	About 5% increase in HR during magnetic storm and in BP on day preceding a magnetic storm on earth	
22. Sothern (RBS) [3, 20, 21; u.p.†] L BW; SBP; DBP; HR; RR; PEF; TE; EH; mood; vigor	St. Paul, Minnesota, USA (45.00°N/55.00)	Minnesotan clinically healthy man 1 20.5 (at start)	30.8 years	1-6/day (N > 50,000/ variable; total N».5 millio values)	About 10.5- and 21-year as well as yearly (P<0.001) cycles n	With Kp: <u>0.740</u> (2.03 year ⁻¹) [5.91 months] (using 22 degrees of freedom) [Cross-correlation with Kp of BP and HR maximal near lag 0]
23. Halberg et al. [22; unpublished] L Urine volume; urinary 17-ketosteroid excretion	Copenhagen, Denmark (55.43°N/55.19)	Clinically healthy man 1 44–59 years	15 years	daily	About 9.28 y (17-KS) or 4.18 y (UV), 1.0 y, 7 d and 3.5 d components, the latter two free-running from social schedule for 17-KS during last 3 y whe subject self-administered testosterone	17-KS with Kp: 0.588 (11.98 year ⁻¹ [4.36 weeks] using 20 degrees of freedom) :n

Study (reference) Design* Variable(s) *	Location (latitude [geographic/geomagnetic]	Population Sample Size Age (years)	<i>Samp</i> span	<i>ling</i> interval	Results * Spectral components	Cross-spectral <u>coherence</u> (frequency) [period]
		IV. N	lodulating role	of melatonin		
24. Tarquini et al. [23] H melatonin (MEL)	Florence, Italy (43.78°N/ 44.26)	Adults 172 20-90	3 years	4-hourly for 24 hours	About-yearly variation in MEL during daytime but half-yearly changes during nighttime at 43.47°N; half-yearly variation at 65.00°N around noon	
25. Maggioni et al. [24] H Melatonin	Milan, Italy (45.28°N/ 46.31)	Women in 3rd trimester of pregnancy (14 healthy and 11 IUGR)	1 year	4-hourly for 24 hours	About half-yearly variation found only in IUGR group, with 1.0 y A and 0.5 y (A,\$\$) difference between the two groups	
			V. Theoretical (Computations		
26. Ulmer et al. [25]	For a field of abc netic field, the o bumin, hemoglot ogy (computation	out 1 nT typical of a magnetic scillating period of some ions oin) is about 1 month, both pu ns based on Earth's magnetic 1	field associated found in cells (I eriods correspon field of 0.5 x 10 ⁻	with the huma Na ⁺ , K ⁺ , Ca ⁺⁺ , ding to promin - ⁴ T typically fc	an circulatory system and with the interplanetary m Mg ⁺⁺) is about one week and that of some protein ent components in the time structure of human phy ound at mid latitudes for ions or molecules in a vac	lag- Is (al- ysiol- cuum)
ISome analyses or versity of Minn ture is beyond ture is beyond to ture is beyond to ture is beyond there are comparable tudes in our ant single lifetime <i>e</i> of the population cles, as in the cles, as in the cles, as in the cles, as in the close of a short the close nultion the close nultion the close nultion to tempon in the sense of the	meta-analyses in the C esota in Minneapolis, A the scope of this table. biomedical equivalents onents with even lowe thropometric data), one and turns for replicatio on rhythms, one deals w ase of findings covering the two studies by Webe ficiently concordant to hm. The 30.8 years of s k for a total of over hal neck, supporting other e dicity properties (that populations and longity rel characteristics of a r reproducibility of some d bross-spectral cohe by cross-spectral cohe	hronobiology Laboratorie Minnesota; a review of th of the about 21-year Hal ar frequencies and even la scannot collect too many ins to populations; in the vith findings on many ind g 112 years of population ar et al. ^{1,2} , over half a million allow a demonstration of elf-measurements of over f a million values provide evidence collected transve vidence collected transve is the consistency of fin udinally on individuals, n process, assumed to be [bi of its characteristics). as to mechanisms of the l rence, superimposed epo	s of the Uni- e vast litera- le cycle (and arger ampli- cycles over a case of each ividuals' cy- anthropom- on individu- the 10-year 10 variables a longitudi- rsely, by vir- dings made otably in re- olstationary propositions chs, and re- er and more	but also years tl mechan bance el produce Cross-spec cients t coheren ship at only cro herein. L = longiti BH = body circumf (S=syst peak ex dination geomag vertical sity; 3h(o other components with periods ranging fro hat are not shared with sunshine. Overal uisms complementing sunshine effects, inclu ffects that may be mediated via intermodula ed by the pineal gland. tral coherence coefficients have in common hat they describe the relation between two nee coefficients are less unspecific in that th a specific frequency. In order to avoid listi as spectral coherence coefficients away from udinal; $T =$ transverse; $H =$ hybrid (linked y height; BW = body weight; HC = head ci erence; AC = abdomen circumference; olic; D=diastolic); HR = heart rate; RR = piratory flow; TE = 1-minute time estimati a; MI = myocardial infarctions; MEL = circ netic disturbance index; WN = Wolf numb component of interplanetary magnetic fielo CR-SD = 3-hour standard deviation of CR; published	m half a week to about 21 l, the evidence points to iding geomagnetic distur- tions involving melatonin n with correlation coeffi- variables. Cross-spectral aey describe the relation- ng spurious associations, n spectral peaks are listed cross-sectional). cross-s

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others whose around-the-clock series for years also allow an exploration of infradians [4, 10, 11]. In this perspective, the Table 1 results suffice to warrant chronome mapping, at a rate that should be comparable to genome mapping. Transdisciplinary knowledge that may thus result should enhance the gain from genome mapping by identifying the molecularly coded bases for everyday physiology in its broadest sense, far beyond investigations on the genetic basis of biological time measurement, a step in the right direction. Otherwise nearly exclusive current focus by genomics upon pathology could gain first in clarifying the mechanism underlying everyday physiology, second by using the information thus gained for a much more complete attack on pathological consequences of physiological alterations in the normal range, and third both physiological and pathological biological chronomes may be of interest to physics as new endpoints for current effects of NPEF, and for a look via ontogeny and phylogeny at physical aspects of worlds before ours.

The scenario of the last half of the 20th century, when the validity, ubiquity, importance and usefulness of about 24-hour rhythms and then of about-yearly patterns and eventually of circaseptans, needed to be established, may repeat itself along the scale of decades. Space and other governmental agencies whose mandates are directly involved in the study of about 10.5- and about 21-year rhythms could provide the financial support that is their mandate, since few investigators can afford to make funding provisions for studies covering the required number of cycles prospectively.

Industry should also realize opportunities for developing and mass-producing instruments that, albeit a sine qua non for ventures in extraterrestrial space, are also critical on a much broader scale for preventive health care, notably for catastrophic vascular disease prevention on earth [10, 11]. The necessary hardware and software is now state-of-the-science for laboratory animals. It should be implemented for use in preventive human health care of sensitive endpoints from the nowgenerally recognized circadian rhythms [52, 63, 69–72]. These were found to be partly endogenous, inferentially statistically validatable phenomena, nearly half a century ago [73, 74]. The developments leading to the recognition of ubiquitous and important circadians, started by 1950, were formulated as a science in its own right, as chronobiology, by 1969 [63]. In the 1950s, the mapping of circadians took some sleepless nights, while that of about-weekly and about-yearly changes was more prolonged. By comparison, however, the task of quantifying, with prospective designs, the biological counterparts of Schwabe's about 10.5-year (circadecennian) and Hale's about 21-year (circavigintunennian) cycles is more demanding, because it takes longer but also when the signal-to-noise ratio tends to be less favorable than that of about-daily and, in some cases, of about-yearly rhythms, Table 2.

The documentation of circadecennians and circavigintunennians in human heart rate and blood pressure is greatly facilitated by the availability of automatically and ambulatorily functioning hardware and software. The cycles in themselves have to be mapped, and while this is ongoing, rather than waiting for the completion of cycles covering, e.g., 50 years, Figure 2, their mechanisms must be explored in as-one-goes tests of factors from within and without. In this context, combined approaches by superposed epochs have revealed non-photic effects from the sun. The cycles in and around us and cross-spectral coherence among them, Table 1, can provide answers concerning responses to magnetic storms that superposed epochs and other remove-and-replace approaches may complement but may not replace [18; cf. 4]. The short-term effects within hours or at most within days, e.g., of magnetic storms, may depend upon the stages of cycles with a lower frequency, as suggested but not (yet?) validated to be the case for effects of Forbush decreases on mortality from myocardial infarction in Minnesota as a function of circadecennian solar cycle stage [75]. Certainly there is a need to look at more than the day of a storm or the day following it. In the case of myocardial infarctions in Minnesota, Table 3, after a (compensatory) decrease in incidence on the day after the storm, there is a statistically significant linear increase in incidence during the six subsequent days (not shown).

An about-10-year periodicity in deaths from myocardial infarctions and in related variables, Figures 3 and 4, is now documented by 3 circadecennian cycles [11, 18]. Magnetic storms, directly or indirectly, also acutely trigger not only myocardial infarctions, but also strokes (and traffic accidents) on earth, Figure 4 [4, 11, 76-81]. Furthermore, they affect a putative mechanism of this hazard, human heart rate variability [82, 83; cf. 11]. The numerical near-matches of Schwabe's and Hale's cycles in biota in Table 1 and Figures 3 and 4 are hints; coherences in this same table suggest an association with NPEF for several aspects of human morphology, physiology and pathology; differences in phase as well as in period, reveal a complex geography-, solar cycle stage- and solar cycle number-dependent association of broad time structures, chronomes, in us with environmental chronomes in variables of the weather in space and on earth, Tables 2-4.

Among the physical proximate factors of the effect on heart rate variability, certain atmospheric pressure fluctuations deserve further testing [84]. Among organismic mediators, melatonin is implicated indirectly in view of geographic differences [85–89] and directly in view of studies on the nocturnal excretion of a melatonin metabolite in relation to geomagnetic disturbances [90], as is cortisol, since the adrenal glands constitute a critical mechanism for everyday physiology [52, 63, 69; cf. 91]. Other topics also await further study [92–96].



* Depending on a postive (+) or negative (-) association of the given variable with WN.

(S)BP: (systolic) blood pressure; HR: heart rate; HR variability; Numbers in () are nonlinearly estimated periods, in years; P: peak; T: trough; horizontal lines indicate spans of data availability.



(S)BP: (systolic) blood pressure; HR: hear rate; HRV: HR variability, gauged by standard deviation; MI: myocardial infarction; 17-KS: urinary 17-ketosteroid excretion; WN: Wolf number.

Table 2. Components resolved nonlinearly in longitudinal series of self-measurements recordedover 30 years and in Wolf number analyzed over corresponding span*

Variable (units)	Trial periods only (vears)			Nonlinear esti	mates (95% CI)		
(()	Period ((years)		Ampliti	ude (units	5)
SBP	6.3	6.33	(6.00;	6.66)	1.67	(0.96;	2.38)
(mm Hg)	10.0	10.21	(9.05;	11.36)	1.24	(0.54;	1.93)
	1.0	1.01	(0.99;	1.02)	1.12	(0.44;	1.81)
	4.7	4.78	(4.42;	5.16)	0.81	(0.10;	1.52)
MAP	10.7	10.48	(9.50;	11.46)	1.55	(0.83;	2.27)
(mm Hg)	6.3	6.21	(5.83;	6.60)	1.41	(0.68;	2.14)
	1.0	1.01	(1.00;	1.02)	1.11	(0.41;	1.81)
	4.7	4.70	(4.33;	5.20) 4.15)	0.73	(.001; (0.11;	1.40)
DBP	10.7	10.98	(10.09.	11 87)	1 84	(1 14.	2 54)
(mm Hq)	6.5	6.43	(5.97;	6.89)	1.24	(0.52;	1.95)
(5)	1.0	1.01	(1.00;	1.02)́	1.08	(0.39;	1.76)́
	4.8	4.76	(4.30;	5.22)	0.68	(;	1.40)
	3.9	3.90	(3.67;	4.14)	0.89	(0.19;	1.60)
HR	15.0	16.53	(14.12;	18.94)	2.61	(1.59;	3.62)
(beats/min)	6.5	5.89	(5.48;	6.30)	1.67	(0.59;	2.75)
	1.0	1.00	(0.98;	1.01)	1.50	(0.45;	2.54)
	3.9	3.92	(3.71;	4.14)	1.35	(0.28;	2.42)
RR	4.5	4.48	(4.26;	4.72)	0.26	(0.10;	0.42)
(breaths/min)	3.5	3.57	(3.35;	3.78)	0.21	(0.06;	0.37)
	5.8 12.5	5.99	(5.35;	0.92) 17 32)	0.15	() 03:	0.35)
	7 0	7 24	(10.15,	8 20)	0.19	(0.03,	0.35)
	1.0	0.99	(0.98;	1.01)	0.15	(.001;	0.30)
PEF	11.5	11.74	(10.36;	13.11)	3.84	(1.78;	5.90)
(L/min)	7.1	6.50	(5.97;	7.03)́	3.29	(1.33;	5.26)́
	2.4	2.42	(2.32;	2.51)	2.31	(0.36;	4.26)
	3.2	3.15	(2.96;	3.33)	1.97	(0.01;	3.93)
	4.2	4.21	(3.90;	4.53)	2.09	(0.12;	4.06)
	1.0	1.00	(0.90,	1.02)	1.80	(,	0.11)
(°F)	2 8.3 25.0	8.30	(7.00;	9.00)	0.07	(0.03;	(0.11)
()	5.4	20.00	(15.00,	37.50)	0.05	(0.02,	0.09)
	4.3	4.46	(4.15;	4.77)	0.04	(.001;	0.08)
	1.0	1.00	(0.98;	1.01)	0.04	.001;	0.07)
TE	10.0	10.29	(9.38;	11.37)	1.08	(0.44;	1.72)
(sec)	2.9	2.94	(2.83;	3.05)	0.81	(0.18;	1.45)
EH	5.4	5.43	(5.03;	5.84)	0.68	(0.23;	1.12)
(sec)	7.1	6.90	(6.16;	7.65)	0.62	(0.21;	1.04)
	3.4;	3.50	(3.32;	3.68)	0.53	(0.11;	0.95)
	3.0	3.05	(2.92;	3.17) 26.75)	0.57	(0.16;	0.97)
	23	2 3/	(7.05,	20.75)	0.20	$\langle \cdot \rangle$	0.07)
	1.0	1.01	(0.98;	1.03)	0.29	$\left(\begin{array}{c} \\ \end{array} \right)$	0.67)
Mood	11.5	11.50	(10.11:	, 13,41)	0.19	(0.07:	0.32)
(AU)	6.2	6.26	(5.53;	6.99)	0.14	(.001;	0.27)
	25.0	21.00	(2.35;	39.65)	0.10	(;	0.23)
Vigor	4.3	4.33	(4.04;	4.62)	0.07	(0.01;	0.12)
(ĂU)	8.3	8.48	(7.33;	9.64)́	0.07	(0.02;	0.12)
	1.0	1.02	(1.00;	1.04)	0.06	(.001;	0.11)
	6.0	6.21	(5.51;	6.91)	0.06	(.001;	0.11)
	3.5	3.42	(3.14;	3.69)	0.04	(.001;	0.09)
Sunspots	10.4	10.27	(10.06;	10.50)	65.97	(59.41;	72.53)
(Wolf number)	5.0	5.32	(5.07;	5.57;	13.87	(7.27;	20.47)

*RBS, a 20.5-year-old man in clinical health at the start of monitoring; 5–6 measurements were collected each day on most days and averaged monthly; components tested, selected from least-squares spectra, fitted concomitantly to residuals from trend assessed by stepwise linear regression, using a 6th-order polynomial at the outset; some trial periods from the complex model fitted whose statistical significance could not be ascertained are omitted. SBP: systolic blood pressure; MAP: mean arterial pressure; DBP: diastolic blood pressure; HR=heart rate; RR: respiratory rate; PEF: peak expiratory flow; TE: 1-minute time estimation; EH: eye-hand coordination. AU=arbitrary units (scale 1–10).

Table 3. Effect of Forbush Decrease (FD) in cosmic ray intensity on mortality from myocardial infarction (MI) in Minnesota*

% change in epoch mean	MI* relative to + 100%	-1	Day FD	+1	Difference (day +1 vs. FD)
1968-1996		-0.275	+4.070	-3.795	7.865
(N=161)		± 2.128	± 2.240	± 1.916	± 3.585
. ,	Student t	-0.129	1.817	-1.981	2.194
	Р	NS	(0.071)	(0.049)	(0.030)
1979-1981†		-5.642	+2.801	+2.841	-0.041
(N=29)		± 5.614	± 6.548	± 4.551	± 9.781
. ,	Student t	-1.005	0.428	0.624	-0.004
	Р	NS	NS	NS	NS

*Epoch = 3 days, the day of the FD and the preceding (-1) and following (+1) days. NS=not statistically significant.

+Span for which a statistically significant effect of FD on the incidence of MI was found in Moscow, Russia.

Table 4. Myocardial infarctions in Minnesota from 1968 to 1996* MESOR (95% CI) Period (95% CI) Amplitude (95% CI) (cases/day) (cases/day) (years) Original data (10.5 y cosine model) 12.19 (12.06; 12.33) 1.15 (0.97; 1.34) All 29 years (y) 9.81 (9.61; 10.00) Original data (10.5 y cosine + linear trend model) All 29 y 12.16 (12.04; 12.28) 10.83 (9.93; 11.74) 0.40 (0.22; 0.57) 68-77 (10 y) 15.06 (14.83; 15.29) 8.03 (4.96; 14.76) 0.26(-0.06; 0.59)78-86 (9 y) 12.26 (12.05; 12.48) 12.10 (10.28; 15.17) 0.94(-1.01; 2.89)87-96 (10 y) 8.93 (8.75; 9.10) Detrended data (10.5 y cosine model) All 29 y 10.83 (10.00; 11.66) -0.04 (-0.15; 0.07) 0.40 (0.24; 0.56) 68-77 (10 y) -0.22(-0.43; -0.01)11.48 (3.23; 19.72) 0.38 (0.09; 0.67) 78-86 (9 y) 0.20 (-0.61; 1.01) 10.64 (8.60; 13.28) 0.76 (0.45; 1.07) -0.54 (-0.71; -0.38) 87-96 (10 y)

*Linear-nonlinear rhythmometry is used to resolve the best-fitting period which in this analysis is allowed to vary as a parameter rather than being fixed as in Table 5. Nonlinear analysis, just like the linear analysis in Table 5, failed to resolve the about 10-year periodicity for the span 1987-1996, another indication of the great variability encountered in the biological near-matches of the solar cycle just as in the solar cycle itself.

MESOR=midline-estimating statistic of rhythm, a rhythm-adjusted mean; amplitude = measure of extent of change within one cycle; 95% CI=95% confidence interval.

Original link between myocardial infarctions and magnetic storms

An unusual opportunity to test the question of whether geomagnetics are health hazards arose when the senior author received from a solar physicist (see dedication) a data set of over 6,300,000 diagnoses, made in response to calls for an ambulance in Moscow during 3 years of an active sun (January 1, 1979, to December 31, 1981). These data had previously been analyzed in descriptive terms [30]. In our hands, a superposed epoch approach showed a modest yet statistically significant increase of about 7% in myocardial infarctions after an earthward turn of the north-tosouth component, B_z , of the interplanetary magnetic field [4; cf. 32, 33]. As Figure 5 shows for Moscow (top left) (and Table 3 suggests for Minnesota), an increase in myocardial infarctions associated with the storm was followed by a decrease. (Another association suggested by superposed epochs related earthward turns of B_z to epilepsy [4; cf. 93].)

Our finding on 85,819 diagnoses of myocardial infarctions as a morbidity statistic [4] was reproduced on the same data set by Villoresi et al. after removal of periodic components [76] and was extended, again on the same data, to myocardial infarctions in association

Cycle N	P (A=0)	$MESOR \pm SE$		Amplitud	e (A) (9	5% CI)	Amplitu MESC	ude/)R	Acrophase (95% CI
1	0.006	12.0 ±	0.1	0.36	(0.18;	0.53)	0.030	-135°	(-105; -164)
2	<0.001	12.4 ±	0.1	0.76	(0.55;	0.96)	0.061	-145°	(-132, -158)
3	0.830	12.1 ±	0.1	0.07	()	0.006	-144°	(,)
Test of equ Parameter	uality of par (s)	ameters in the 3 df	cycles F	Р					
MESOR	(-)	(2, 20)	11.296	0.0005					
Amplitude		(2, 20)	12.820	0.0003					
Acrophase		(2, 20)	0.231	0.7954					
(Α,Φ)		(4, 20)	6.762	0.0013					
		(6, 20)	9.586	<0.0001					

Table 5. Differences among 3 consecutive solar cycles found by fit of 10.5-year cosine curve to daily mortality from myocardial infarction in Minnesota*

with another index of planetary geomagnetic activity, the aa index. Furthermore, there was also an association of myocardial infarctions with a (Forbush) decrease in the intensity of galactic cosmic rays, also used with B_z turns and aa increases as a third, albeit indirect index of magnetic storms [76]. These findings were extended even further, insofar as an increase in the incidence of strokes was first found in Moscow, Figure 5, again based on Forbush decreases [76], and was extended again to myocardial infarctions in St. Petersburg, Russia [77].

dence interval. Acrophase reference: 00:00 on 1 July 1967.

The importance of the findings had already been emphasized on the basis of our [4] and separate subsequent analyses of the Muscovite data [76] by Roederer [5], who called for further confirmations. These were forthcoming also from Mexico City [79], as from Minnesota [11] and thus strengthened the case of magnetic storm effects on myocardial infarction at various geomagnetic (and geographic) latitudes and on different continents. An association of pathology with Forbush decreases was further extended to strokes in Novosibirsk [78]. Studies in Slovakia suggested heliogeophysical effects on human sudden cardiovascular mortality [80] and traffic accidents [81].

Population rhythm of deaths from myocardial infarctions

One of the two reports failing to detect a relation to geomagnetics of mortality from myocardial infarctions [22; cf. 21] rightly called for analyses by reference to solar cycle stage. We found intra- and inter-cycle differences both in mortality statistics from myocardial infarction and in longitudinal physiological data covering up to 3 solar cycles [82, 83; cf. 11]. In mortality from 129, 205 myocardial infarctions in Minnesota during the past several decades, a decreasing trend is obvious. It would be nice if it were solely a result of anthropogenous diagnostic and therapeutic endeavors and not

also a feature of long-term cycles; it is currently beyond our scope focused on about 10.5-year rhythms. With or without removing this trend, a statistically highly significant cycle in the 1968-1996 data is apparent in Table 4. This cycle's medical significance is suggested by an excess of 220 deaths/year from myocardial infarctions during times of high vs. low solar activity [11]. There is also a statistically highly significant difference in the characteristics of about 10-year patterns of myocardial infarctions during the last 3 solar cycles when these characteristics are estimated separately. As summarized in part in Table 5, there are cycle-to-cycle differences in the MESOR (midline-estimating statistic of **r**hythm), a rhythm-adjusted average, and also in the extent of change, the amplitude, and in the timing, the acrophase; Table 4 shows differences in the period, assessed by nonlinear least squares. These results all suggest the need for studies over more than 1 wobbly solar cycle, Figure 6, with also-wobbly biological counterparts.

As pointed out in a related context, geographic location may also be important: During the years 1979 to 1981, based on the analysis of 85,819 myocardial infarctions (from 6,304,025 ambulance calls in Moscow over that 3-year span), there is a statistically significant increase in the incidence of myocardial infarctions in Moscow on the day following magnetic storms. There was a similar increase in the incidence of mortality from myocardial infarctions after Forbush decreases in Minnesota when all data from Minnesota for three solar cycles are summarized, Table 3. As re-emphasized, in both geographic locations (in Moscow and in Minnesota), the increase related to the storm is compensated by a decrease on the following day; the difference is statistically significant at each site.

The foregoing finding suggests that while the presumably non-photic short-term solar effect is real, whether direct or indirect, at least part of it consists of having some of those who would have died on a given

Franz Halberg, Germaine Cornélissen, Kuniaki Otsuka, Yoshihiko Watanabe, George S. Katinas, Naoto Burioka, Anatoly Delyukov, Yuri Gorgo, Ziyan Zhao, Andi Weydahl, Robert B. Sothern, Jarmila Siegelova, Bohumil Fiser, Jiri Dusek, Elena V. Syutkina, Federico Perfetto, Roberto Tarquini, R.B. Singh, Brad Rhees, Dennis Lofstrom, Paula Lofstrom, Paul William Cort Johnson, Othild Schwartzkopff & the International BIOCOS Study Group



day, die a day earlier: hence the decreased incidence on the day after the storm. A subsequent linearly increasing incidence of myocardial infarction during the ensuing six days and the excessive incidence during spans of solar maxima establish a long-term effect of nonphotic solar activity as an actual if modest excess of myocardial infarctions, complementing the results of remove-and-replace approaches such as that by superposed epochs. By comparison to other features of weather, such as the winter (in temperate climates), described already by Victor Hugo as the killer of the poor, the non-photic solar activity effect is relatively small [11]. Nonetheless, the presumably solar effect (or is it an effect of a change in flux of galactic cosmic rays displaced by magnetic storms?) constitutes a statistically and biologically significant association, and thus a challenge to combined physical and physiological monitoring at each of several diverse geographic sites, in order to gain a reasonable picture of planetary behavior.

To recapitulate, there may be several kinds of associations of deaths from myocardial infarctions with enhanced solar activity: a short-term effect that is immediately compensated, at least in part, by fewer deaths on the day following the storm, an effect during the ensuing week that is statistically significant and may be dubbed subacute, and a long-term effect that provides a clear overall excess of deaths during years of solar maxima. Whether the short-term-acute and subacute-effects of storms may differ as a function of solar cycle stage is an impression not yet validated in inferential statistical terms. That, in the short term, the storm triggers at least some myocardial infarctions that would have otherwise occurred perhaps a day later, is established both for data from Moscow and from Minnesota [4, 11].

The already-noted failure to detect an increase in association with Forbush decreases in mortality from myocardial infarctions when, instead of all available data, Table 3, only those during 1979–1981 in Minnesota are considered, while an increase of 12% was found



Fig. 6. Period length of solar cycle since 1700



Fig. 7. Recently, as shown in figure 7, Germaine Cornélissen found a 51-year cycle in data for the last half of the century on the mortality from stroke in Minnesota. Conceivably, some of the decline in stroke during the past two decades is part of a natural cycle. This possibility is supported by an upward trend in most recent years in Minnesota, also found by Bjorn Johansson in Lund and with Paul W.C. Johnson in data from Arkansas.

by Villoresi et al. [76] in Muscovite morbidity of myocardial infarctions during the same span does not suffice to establish geographic differences. Whether morbidity in one location (Moscow) can be compared with mortality in another (Minnesota) is an open question. We also need to keep in mind that geomagnetic and geographic latitudes differ in opposite ways between Minnesota ($45^{\circ}00'$ N geographic, 55.00° N geomagnetic) vs. Moscow ($55^{\circ}45'$ N geographic, 50.76° N geomagnetic). Most important, the Muscovite morbidity data are based on a much larger data base than those on mortality from myocardial infarction in Minnesota during 1979–1981 only. The Minnesotan data over several decades are in keeping with the analyses of Muscovite data.

Since geographic location in the U.S. had not been explored earlier, the Minnesotan data render an analysis by state, as well as overall for the U.S. over several solar cycles, highly desirable. The difference in results on mortality from myocardial infarction in the U.S. as a whole vs. that in Minnesota [21, 22 vs. 11] may not stem only from a linear relation to latitude, since effects of magnetic storms on morbidity from myocardial infarction are also seen in Moscow and St. Petersburg, and furthermore much closer to the equator in Mexico City [79]. If latitude were involved, it would have to be a nonlinear relation where equatorial geomagnetic effects are reflected in the data from Mexico City [79]. The great differences among consecutive solar cycles are also relevant, in keeping with the Minnesota data, summarized in Tables 4 and 5. Myocardial infarctions and perhaps epilepsy [4, 92, 93], emotional depression [95] and suicide [91] may respond to storms in space, as do power stations that fail on earth [97] and perhaps communication in space [98, 99; cf. 100] that may also be influenced by magnetic storms and/or associated phenomena, perhaps only in certain stages of the Schwabe and Hale ~10.5- and ~21-year cycles of solar activity and/or in some cycles but not in others (Figure 7).

The BIOsphere and the Cosmos, BIOCOS

Beyond aligning geophysical data with data about deaths from public health archives, associations of magnetic storms and/or galactic cosmic rays with physiological, pathological and morphological phenomena were found by superposed epochs and cross-spectral coherence, even in microbial sectoring, reflecting probable genetic changes [101; cf. 102, 103], and in human physiology [11, 104, 105]. A host of other results all support the proposition that we are influenced by storms in space (e.g., of the north-to-south turn of B_z) with effects trickling down to earth (as seen in K_p) [4, 33]. The observation that myocardial infarctions on the one hand are cross-spectrally coherent, on the other hand, with B_z or K_p at a frequency identical to nearly the second decimal place for K_p and B_z [4, 33], is pertinent.

Heart rate variability: the suspect

Nearly 3 years ago, the then-accumulated archival, morphological, physiological and pathological human data, most of them in Table 1, and comparative data on other species were sufficiently substantial to convene a special session of the Russian Academy of Medical Sciences in Moscow, to examine in particular results from monitoring worldwide under the informal project on the **BIO**sphere and the **COS**mos (BIOCOS) [66]. On this occasion, those in attendance unanimously signed a document endorsing the BIOCOS project. The BIOCOS concept was subsequently introduced by invitation at a symposium on the environment at the meeting of the International Union of Physiological Sciences in St. Petersburg, Russia, a few days later (in early July 1997; 106]. In the interim, BIOCOS was further strengthened by Dr. Kuniaki Otsuka's originally Asian, now International Chronome Ecologic Study of Heart Rate Variability (ACEHRV/ICEHRV) collecting reference values for the chronomes of heart rate variability. BIOCOS now involves opportunistic monitoring of blood pressure and heart rate in Minnesota, Michigan, China, the Czech Republic, Italy, Japan and Mexico, and through ICEHRV 7-day or longer ECGs, in most of these countries, in India, in the arctic region of Norway and in Ukraine.

The ECG [11, 104, 105] and the circadian standard deviation of heart rate [11] served for the detection of effects of magnetic storms as lowered heart rate variability, a condition also constituting a feature of disease risk syndromes [11, 72]. The detection of a very high risk is critically important for those preparing to venture to sites away from hospitals, say in Antarctica or in extraterrestrial space. For an asymptomatic person who is already at an unrecognized high vascular disease risk, there will be double jeopardy during storms, e.g., in extraterrestrial space. The physiological monitoring of blood pressure and heart rate and also of the ECG, mostly for 7 days or longer has detected disease risk syndromes defined by too much variability in blood pressure [70, 72, 107, 108] and too little in heart rate [109, 110], and has also revealed the effect of magnetic storms on these endpoints.

Earlier, we had aligned a reduction of the standard deviation of heart rate [109, 110] (found earlier by others to be a risk factor; 111] in a meta-analysis of data from patients who died within 5 years after a myocardial infarction or had 24-hour ECGs before a sudden death [11]. A similar reduction in the standard deviation of heart rate was found in presumably healthy cosmonauts in earth orbit during magnetic storms by Baevsky (cf. 11]. A number of chronobiological alterations such as a reduction in variability below an evidently critical threshold or an increase in blood pressure variability above a threshold are now documented as risk syndromes in prospective and retrospective studies. The thresholds in question accumulate as information in a data bank to a workable extent for humans of both genders and various ages, and are to be refined further and to be specified for ethnicities beyond our current data bases that now pertain to Caucasians and Asians. Pertinent data were presented at recent geophysical meetings [112–114], and (by invitation) at special symposia [1, 115–118].

Melatonin

Apparent latitudinal effects involve melatonin as a possibly underlying and latitude-dependent mechanism. Thus, by day at the middle latitude of Florence at 43°N [85], a yearly pattern, probably reflecting sunlight, was seen during the hours of daylight. A half-yearly rhythmic signature of geomagnetics [119, 120] was seen only in data by night in Florence, whereas in the arctic the half-yearly pattern was seen at noon [85; cf. 87]. Latitudinal effects were also seen by others [86, 121, 122], although some samples were restricted to the night. Accordingly, day-to-night differences in the about-yearly modulation of circulating melatonin are not always assessable. Their investigation appears to be especially significant for follow-up work. There is a need for further investigation through the extension of systematic year-long sampling in both the Antarctic and Arctic, with simultaneous monitoring of pulsations that may be involved in resonances of human and other biological spectra.

Discussion

Most recently, in one of our ICEHRV studies, we found a marked disturbance of circadian rhythms and the appearance of a very large about 7-day (circaseptan) component in different endpoints of heart rate variability [11]. Inquiring about any unusual conditions during the 7 days of ECG monitoring, we were told that none were known. Somewhat later, however, we learned that a magnetic storm occurred on certain days of the 7-day monitoring. In separating data obtained during relative magnetic quiescence from those obtained during magnetic disturbance, we found a statistically significant difference in spectral regions centered around 10.5 seconds and 46.5 seconds, but not around 3.6 seconds [11, 104, 105], a spectral region associated with the parasympathetic autonomous nervous system. Hence, we postulated a role of the sympathetic activity, considered earlier by others in a different context in space [123]. This was at first a single anecdotal case on one subject [11, 104, 105]. Most recently, however, in 7-day ECGs recorded in Alta, Norway, at 70°N, results from 8 subjects reproduced the effect of magnetic storms observed earlier, again with a reduced heart rate variability in spectral regions associated probably with sympathetic and certainly not in regions corresponding to parasympathetic activity [11].

A physiological basis for the worldwide data accumulating on myocardial infarctions may be on the horizon. The transdisciplinary finding of solar and possibly broader bioeffects may be of interest to physics and biomedicine alike, each science using endpoints from the other. Biologically and geophysically interesting information may be found by exploring the relatively new area of geographic if not latitudinal effects on health and disease, with special focus on the auroral oval. This possibility has been explored at best with focus on only one or the other rhythm by others [124–134] without yet considering the spectrum of rhythms as a whole and the yet broader chronome that includes focus on chaotic changes and trends as well.

Also complementing any disturbance (dyschronism) following transmeridian crossing, or jet lag [63], is the opportunity to seek a "parallel lag" as a possibly geomagnetically influenced problem in the adjustment to new environments. A consequence of parallel crossing, just like jet lag, can have different effects upon rhythms with different frequencies and upon the even broader chronomes of different variables. As a precedent from transmeridian dyschronism, after the crossing of eight meridians, about 7-day (circaseptan) rhythms may not adjust for several weeks; their adjustment, is much slower than that of circadians [135]. The circannual rhythm in blood pressure, after crossing the equator from Minnesota to Brazil, may not adjust within a year as a study (limited to only a 2-year reference data base) suggests [136]. Studies with monitoring for several decades in each location before and after a transparallel shift seem desirable.

Systematic monitoring for purely scientific purposes could have substantial applied benefits not only in polar regions and in space, but anywhere on earth, irrespective of latitude. The auroral oval is one of the ideal sites to be included in geophysiological monitoring studies. But magnetic storms influence health worldwide: they affect mortality from vascular disease in Minnesota, Mexico City and Slovakia, and morbidity in Moscow and St. Petersburg, as they do in Novosibirsk, Russia; they influence human physiology in health in Tokyo and in Alta, Norway, as they do for cosmonauts in earth orbit [137].

The resolution of many remaining questions, no longer of a controversy, is a task worthy of a systemic program at different geomagnetic as well as geographic sites, particularly in the polar region and also call for the tearing down of disciplinary barriers, as Roederer also did by admonition [61] and implementation [138, 139]. A routine space weather report, and countermeasures, yet to be developed, the sooner the better, as suggested by others [67] and ourselves [10] are overdue, as is an investment into internationally coordinated physiological and physical monitoring so that biomedicine and ecology catch up with what physicists have been doing for centuries. In the tradition of Gilberd [140], the human body can provide a most sensitive radiation detector. Biologists, health care providers in particular, can serve science and physics in a transdisciplinary, Gilberdian way.

Outlook

Life can be viewed as a set of transiently self-sustaining organized structures in time and space. These structures, chronomes, consist of chaotic changes and rhythms undergoing trends, for a sufficient duration to possibly reproduce themselves and thereby to evolve. Chronomes of organisms continuously communicate with the time structures with similar elements in the environment, which provides photic and non-photic solar and further galactic modulations. The rhythmic elements of the chronomes, in and around us, intermodulate as feedsidewards, i.e., there are interactions among the rhythms in physiological and also among those in natural physical entities and in the intercommunicating open organism-environment systems. These interactions among two or more biological and/or physical entities are characterized by sequential patterns in time, involving recurrent quantitative or even qualitative changes. The latter can be the changing effect of one entity upon another, entailing a sequence of inhibition, no-effect and stimulation, recurring rhythmically and to that extent predictably. Certain ways of procedure, if not rules of chronomes (notably of rhythms in these time structures) are that:

- 1. for each inferentially statistically validated rhythm as an element of an organismic time structure, one can seek a corresponding element in the chronome of a natural physical environmental variable. This is how a 6.74-day component was detected in a record of geomagnetic disturbance (K_p) covering 59 years. The finding in biology of a near- (but not precisely) 7-day week prompted biologists to search for a geophysical near-match [4]. The near-weekly component was then further specified as to its variation with solar cycle stage [5] and for an even longer span of over 100 years [6];
- 2. for each periodic component in the environment, a near-matching organismic component may be sought, which is how a half-yearly period was found in severe attacks of epilepsy as a response to a hint from the biophysicist Armin Grafe [119];
- 3. biological rhythms without environmental nearmatches may point to the disappearance, in the course of life's development on earth, of a natural physical environmental cycle. Accordingly, it would be most interesting if a biological rhythm would have no environmental near-match. A current challenge is the search for a possible environmental counterpart for about 8-hourly rhythms in vasoactive substances

such as in the case of endothelin-1, a powerful vasoconstrictor [11, 141], and also in the population density of the endotheliocyte [11];

4. in their growth and development, human beings and other multicellulars are living fossils that may replay in their rhythmic dynamics during ontogeny, the sequences that occurred during the development of life. In this context, humans are a source of information for scholars on the origins of life par excellence, in contrast to eukaryote single cells or prokaryotes whose growth, development and differentiation may not exhibit the time-lapse phenomena observed in more differentiated organisms. In this same context, certain multicellular organisms may be better "fossils" for certain things as compared to others. Thus, crayfish [142] may be a better subject of study than human beings [143–145], rats [146] or piglets [147], for the investigation of the biological week, since a circaseptan is present in locomotor activity of crayfishes at 6 months of age. In contrast, by the end of the first month of life the about 7-day component of physiological variables compares unfavorably in terms of its (circaseptan) amplitude with the amplitude of circadian rhythms in humans or rats. In old age, circaseptans and ultradians regain some relative prominence, but not necessarily exceed a circadian rhythm in amplitude.

The sites of an organism's origins may be distinguished on the basis of ontogeny. Organisms that have a prominent 7-day component early in life on earth may have developed away from the alternations of day/ night and night/day recurring each day, on earth or on Mars, and may have locked into the near 7-day harmonic of the sun's rotation period that may be ubiquitous in the solar system. There may have been on earth some geomagnetic input from the moon as well, granted that the latter is reportedly small. Conceivably, the near 7-day period found early in the ontogeny of species such as rats, piglets, humans and crayfish is compatible with life originating anywhere in the solar system, deep at the bottom of the ocean on earth or inside Mars or in the ice of Europe. As the fourth harmonic of the sun's rotation around its axis, the physical week may have a wide influence, yet only in the absence of a near-daily alternation of light and darkness that may have been the principal driver for organisms evolving on the surface of the earth or of Mars.

Galactic and/or photic, thermic and other effects, associated with corpuscular radiation from the sun, are such drastic drivers as to affect microbial as well as human variables, morphological ones such as body length and weight, and physiological ones such as heart rate variability that may have some relation to the about 10-year cycle in myocardial infarctions and indeed vascular and probably other pathologies, notably those related to the brain and heart.

For the study of photic effects from the sun on earth, periodicities of about 1 year and about 1 day are useful. Conversely for the study of effects from corpuscular radiation from the sun and its effects on biota, about-halfweekly, about-weekly, about-half-yearly, about 10.5- and about 21-yearly cycles are of interest, and circasemicentennial cycles may lead us to thermic effects. The ratio of amplitudes of the latter periodicities (related, e.g., to geomagnetics) to the day or the year, may provide a hint about the relative prominence if not the roles played by photic and non-photic corpuscular effects of the sun, among the diversity of natural physical and environmental factors [148].

Galactic drivers concomitantly cannot be ruled out for life on earth. The effect of cosmic ray flux may actually be a more direct effect as compared to that of a magnetic storm that displaces cosmic ray flux to the earth, and may, for instance, thereby reduce the number of colonies with sectors in a testable model that may be used in a standardized fashion in long-overdue coordinated biological and physical, including physiological and archival human monitoring.

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