



## INSIDE THIS ISSUE:

Electromagnetic  
Cell Leakage &  
Autism 2

Cost of  
Environmental  
Illness in Children 6

Deodorants are  
Leading Cause of  
Allergic Contact  
Dermatitis 7

MCS Awareness  
Displays 8

World Health  
Organization  
Meeting on MCS 9

Preventing  
Misdiagnosis and  
Intimidation 11

Patient Support  
and Resources 15

Community News 23

Research  
Studies 24

# MCSA NEWS

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## *Electromagnetically Induced Cell Leakage*



## *May Cause Autism*

*Op-Ed*

# ***How Electromagnetically-Induced Cell Leakage May Cause Autism***

**- Andrew Goldsworthy, PhD**

**“There has been a 60-fold increase in ASD in recent years.”**

## **What is autism?**

Autism is in fact a group of life-long disorders (autistic spectrum disorders or ASD) caused by brain malfunctions and is associated with subtle changes in brain anatomy (see Amaral *et al.* 2008 for a review). The core symptoms are an inability to communicate adequately with others and include abnormal social behavior, poor verbal and non-verbal communication, unusual and restricted interests, and persistent repetitive behavior. There are also non-core symptoms, such as an increased risk of epileptic seizures, anxiety and mood disorders. ASD has a strong genetic component, occurs predominantly in males and tends to run in families.

## **Genetic ASD may be caused by calcium entering neurons**

It has been hypothesized that some genetic forms of ASD can be accounted for by known mutations in the genes for ion channels that result in an increased background concentration of calcium in neurons. This would be expected to lead to neuronal hyperactivity, the formation of sometimes unnecessary and inappropriate synapses, which in turn can lead to ASD (Krey and Dolmetsch 2007).

## **Electromagnetic fields let calcium into neurons too**

There has been a 60-fold increase in ASD in recent years, which cannot be accounted for by improvements in diagnostic methods and can only be explained by changes in the environment. This increase corresponds in time to the proliferation of mobile telecommunications, WiFi, and microwave ovens as well as extremely low frequency fields (ELF) from mains wiring and domestic appliances. We can now explain this in terms of electromagnetically-induced membrane leakage leading to brain hyperactivity and abnormal brain development.



**“This loss of calcium is important because calcium ions bind to and stabilize the negatively charged membranes of living cells.”**



### **Non-ionizing radiation makes cell membranes leak**

The first effect of non-ionizing electromagnetic radiation is to generate small alternating voltages across the cell membranes, which destabilize them and make them leak. This can have all sorts of consequences as unwanted substances diffuse into and out of cells unhindered, and materials in different parts of the cell that are normally kept separate, become mixed.

### **Why weak fields are more damaging than strong ones**

We have known since the work of Suzanne Bawin and her co-workers (Bawin *et al.* 1975) that modulated radio-frequency electromagnetic radiation that is far too weak to cause significant heating can nevertheless remove calcium ions (positively charged calcium atoms) from cell membranes in the brain. Later, Carl Blackman showed that this also occurs with extremely low frequency electromagnetic radiation (ELF) but only within one or more “*amplitude windows*”, above and below which there is little or no effect (Blackman *et al.* 1982; Blackman 1990). A proposed molecular mechanism for this can be found in Goldsworthy (2010). In particular, it explains why weak electromagnetic fields can have a greater effect than strong ones and why prolonged exposure to weak fields (where cells are maintained in the unstable condition for longer) is potentially more damaging than relatively brief exposure to much stronger ones.

### **How calcium ions stabilize cell membranes**

This loss of calcium is important because calcium ions bind to and stabilize the negatively charged membranes of living cells. They sit between the negatively charged components of the cell membrane and bind them together rather like mortar binds together the bricks in a wall. Loss of just some of these calcium ions destabilize the membrane and make it more inclined to leak, which can have serious metabolic consequences. Among these are the effects of membrane leakage on the neurons of the brain.

### **How membrane leakage affects neurons**

Neurons transmit information between one another in the form of chemical neurotransmitters that pass across the synapses where they make contact. However, the release of these is normally triggered by a brief pulse of calcium entering the cell. If the membrane is leaky due to electromagnetic exposure, it will already have a high internal calcium concentration as calcium leaks in from the much higher concentration outside. The effect of this is to put the cells into hair-trigger mode so that they are more likely to release neurotransmitters and the brain as a whole may become hyperactive (Beason and Semm 2002; Krey and Dolmetsch 2007, Volkow *et al.* 2011). This may not be a good thing since the brain may become overloaded leading to a loss of concentration and what we now call attention deficit hyperactive disorder (ADHD).

### How does this impact on autism?

Before and just after its birth, a child's brain is essentially a blank canvas, and it goes through an intense period of learning to become aware of the significance of all of its new sensory inputs, e.g. to recognize its mother's face, her expressions and eventually other people and their relationship to him/her (Hawley & Gunner 2000). During this process, the neurons in the brain make countless new connections, the patterns of which store what the child has learnt. However, after a matter of months, connections that are rarely used are pruned automatically (Huttenlocher & Dabholkar 1997) so that those that remain are hard-wired into the child's psyche. The production of too many and often spurious signals due to electromagnetic exposure during this period will generate frequent random connections, which will also not be pruned, even though they may not make sense. It may be significant that autistic children tend to have slightly larger heads, possibly to accommodate unpruned neurons (Hill & Frith 2003).

Because the pruning process in electromagnetically-exposed children may be more random, it could leave the child with a defective hard-wired mind-set for social interactions, which may then contribute to the various autistic spectrum disorders. These children are not necessarily unintelligent; they may even have more brain cells than the rest of us and some may actually be savants. They may just be held back from having a normal life by a deficiency in the dedicated hard-wired neural networks needed for efficient communication with others.

A useful homology might be in the socialization of dogs. If puppies do not meet and interact with other dogs within the first four months of their life (equivalent to about two human years), they too develop autistic behavior. They become withdrawn, afraid of other dogs and strangers, and are incapable of normal "pack" behavior. Once this four-month window has passed, the effect seems to be irreversible (just like autism). If this homology is correct, it suggests that experiments on dogs could hold the key to the investigation of autism and its possible links with electromagnetic exposure.

Dr Andrew Goldsworthy, Lecturer in Biology (retired), Imperial College London

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Andrew Goldsworthy was born in 1939. After a conventional Grammar School education he obtained a First Class Honors Degree in Botany followed by a PhD for research into plant physiology and biochemistry at the University of Wales. He went on to lecture at Imperial College London, where he spent the rest of his career. He has had many teaching and research interests, ranging from the biochemistry of photorespiration to the biology of space flight. He retired in 2004 but remains as an honorary lecturer. He was also a scientific advisor to the European Space Agency and is currently a scientific advisor to several European charities concerned with the environment and electromagnetic fields, including the Bio Electromagnetic Research Initiative, the Radiation Research Trust, and Electrosensitivity-UK. He has always had a strong interest in how living organisms use internally-generated electric currents to control their growth and metabolism, and in their disruption by externally-applied currents and fields. In his retirement, he pieced together nuggets of information from a wide range of scientific journals and created simple layperson's explanations of how weak electromagnetic fields affect us all. The first of these can be found at <http://tinyurl.com/2nfujj>.

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*Scientific Study*

# Environmental Illnesses Cost \$76.6 Billion Annually in Children Alone

**“Poor childhood health caused by environmental factors costs the United States \$76.6 billion per year.”**

A study published in Health Affairs has determined that poor childhood health caused by environmental factors costs the United States \$76.6 billion per year. Air pollution and exposure to toxic chemicals found in air, food, water, soil, and homes were cited as the primary contributing environmental factors.

This is a dramatic increase over prior years and represents 3.5% of children’s health care costs. The study was lead by Leonardo Trasande of the Mount Sinai School of Medicine .

Trasande’s focus was on environmentally-linked lead poisoning, childhood cancer, asthma, intellectual disability, autism, and attention deficit disorder. What he determined was that environmentally linked:

Lead poisoning costs \$50.9 billion per year

Autism costs \$7.9 billion per year

Intellectual disability costs \$5.4 billion per year

Exposure to mercury (methyl mercury) costs \$5.1 billion per year

Attention deficit hyperactivity disorder costs \$5.0 billion per year

Asthma cost \$2.2 billion per year

Childhood cancer costs \$95.0 million per year

“The thing about the health effects from environmental factors is that they are preventable,” says Lourdes Salvador of MCS America, “Replacing toxic chemicals and products with safe ones tightly regulated by an independent regulatory agency would completely eliminate these illnesses and prevent so much pain and suffering.”

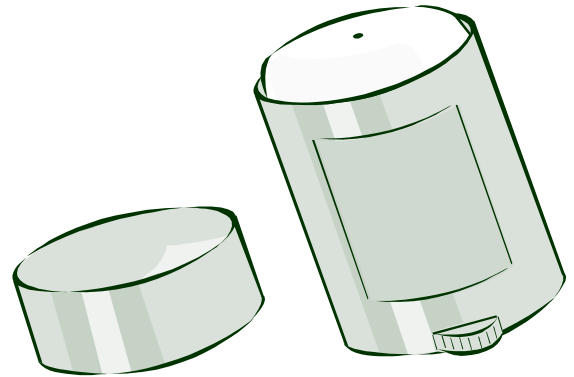


*Scientific Study*

# Deodorants Are the Leading Cause of Allergic Contact Dermatitis

The fragrance contained in many deodorants is the leading cause of allergic contact dermatitis.

Researcher MV Heisterberg says, "Fragrances frequently cause contact allergy, and cosmetic products are the main causes of fragrance contact allergy. As the various products have distinctive forms of application and composition of ingredients, some product groups are potentially more likely to play a part in allergic reactions than others."



After a study was done comparing deodorants and fragrance mixes they contained, Heisterberg and colleagues determined that deodorants were the leading causes of fragrance allergy, especially among men.

Heisterberg says, "Seemingly, deodorants have an 'unhealthy' composition of the fragrance chemicals present."

Fortunately, fragrance is not necessary to the function of deodorant. There are many fragrance free deodorants on the market that can be purchased in stores. Using a fragrance free deodorant will prevent contact dermatitis, allergies, and asthma from fragrance ingredients. Other natural, non-toxic alternatives to deodorant include:

### **Baking Soda or Corn Starch**

Dust body and/or underarms.

### **White Clay**

Rub in as a paste and rinse.

### **Deodorant Crystal**

Sold in stores. Wet, rub on.

### **Peroxide**

Wash underarms several times a day and apply peroxide to remove bacteria and control odor.

### **Reference**

Heisterberg MV, Menné T, Andersen KE, Avnstorp C, Kristensen B, Kristensen O, Kaaber K, Laurberg G, Henrik Nielsen N, Sommerlund M, Thormann J, Veien NK, Vissing S, Johansen JD. Contact Dermatitis. 2011 May;64(5):258-264. doi: 10.1111/j.1600-0536.2011.01889.x. PMID: 21480912

*Awareness and Recognition*

# *2011 MCS Awareness Library Display in Tallahassee, Florida*

Christiane Tourtet B.A., Founder and President of International MCS/EMS Awareness, presents her MCS/EMS Awareness Month Display at The Dr. B. L. Perry, Jr. Public Branch Library, Tallahassee, Florida.



*Awareness and Recognition****World Health Organization  
Meeting on MCS/EHS***

**“This loss of calcium is important because calcium ions bind to and stabilize the negatively charged membranes of living cells.”**



May 11 (USA) - Maria Neira, Public Health and Environment Director of World Health Organization met with Scientists and non-government organizations on May 13th at 10:00 AM to discuss adding Multiple Chemical Sensitivity (MCS) and Electromagnetic Hypersensitivity (EHS) to the International Classification of Diseases ICD10 code list. A press conference will follow at 11:30.

Francisca Gutiérrez Clavero, president of the Spanish organization ASQUIFYDE and Francesca Romana Orlando and vice president of the Italian Association for Environment and Chronic Toxic Injury (AMICA) met with Neira to present the petition. More than 200 Health experts and 240 non-government organizations in 26 countries have signed the petition to include MCS and EHS to the disease registry.

Dr. Anunciación Lafuente, president of the Spanish Society of Toxicology and professor of toxicology at the University of Vigo is a member of the working group at the Ministry of Health which is developing a consensus document on MCS in Spain. Also in the working group is Dr. Julián Márquez, a retired neurophysiologist and former Director of the Department of Neurophysiology at the Bellvitge Hospital in Barcelona. Márquez has long term experience with MCS patients. A third member, Dr. Chiara De Luca, director of the BILARA (BILAncio Radicalico e Antiossidante) Laboratory at the Istituto Dermopatico dell'Immacolata in Rome, has published significant studies about the role of oxidative stress in MCS patients. All three support the immediate inclusion of MCS and EHS in the ICD10 for diagnostic purposes.

The lack of an ICD-10 code for MCS and EHS leaves millions of people without a correct diagnosis and it prevents governments from taking adequate health support and preventive policies.

"MCS and EHS are included by many scientists in a group of diseases shared by sensitization of the central nervous system, such as Fibromyalgia (FM) and Chronic Fatigue Syndrome (CFS). According to the majority of scientists, this sensitization is triggered by environmental factors," explains Clavero, "But, while FM and CFS are classified in the International Classification of Diseases ICD-10, MCS and EHS still are not, except for Germany, Austria and Japan, where MCS is included" under other codes.

These conditions have a significant worldwide prevalence. According to different studies, about 15% of the (Kreutzer, R.; Neutra, RR.; Lashuay, N.) of people reporting sensitivities to chemicals. While 15% of the population is sensitive to chemicals in consumer products, a smaller percentage are severely disabled by it (Caress & Steinemann, 2003).

The prevalence of EHS is about 3-6 % in the general population, though the statistics vary from country to country.

"The recognition of these two illnesses would also have a global impact on financial savings in terms of health care expenditure, because a correct diagnosis is the first step to prevent people from becoming severely ill or disabled, especially in the case of environmentally triggered illnesses", says Clavero.

"WHO, the most important international health agency, can not delay any more the listing of MCS and EHS in the ICD chapter of environmental illnesses, because the scientific evidence is clear, especially when one is able to distinguish the independent research from the scientific papers produced by scientists with industry ties", adds Orlando.

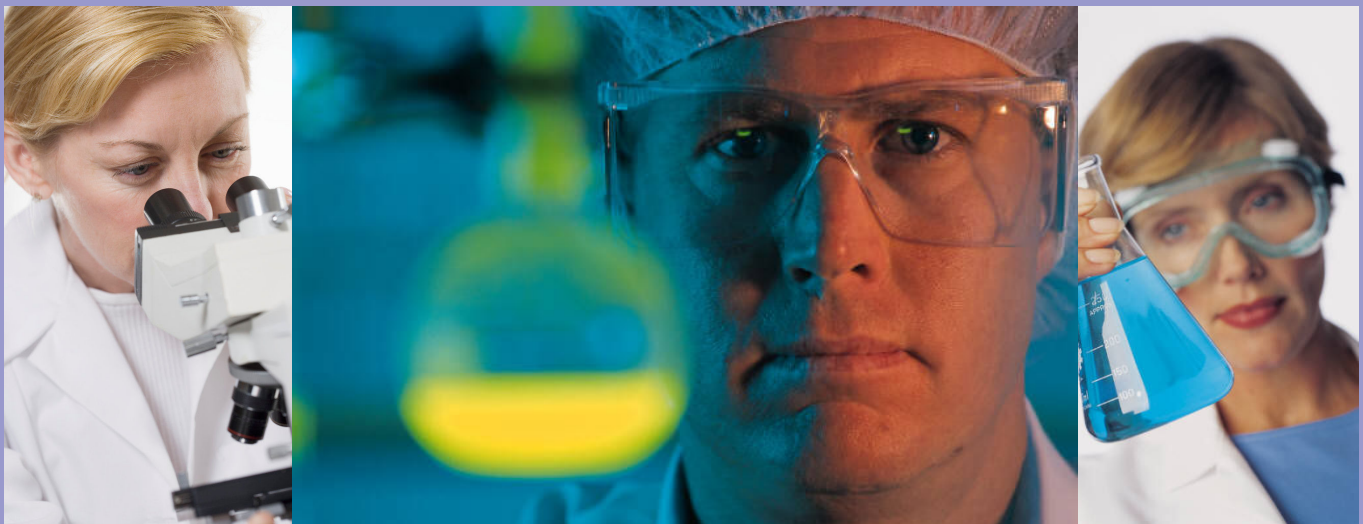
People with MCS and EHS are often treated symptomatically due to a lack of medical professionals who are trained and experienced in environmental medicine.

"The WHO recognition would promote further research", says Orlando. Further research would lead to better understanding and treatment options.

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**Editors Note:**

We have been told that the meeting went well and a summary of the meeting is being prepared to send to everyone.



*Op-Ed*

# ***The Wastebasket Diagnosis***

## ***Preventing Misdiagnosis and Intimidation***

**“A  
wastebasket  
diagnosis is a  
vague or fake  
medical  
or  
psychiatric  
diagnosis.”**

When the cause of a patient’s illness is not immediately obvious, a reference to a brilliant diagnostician is provided. The diagnostician’s sole focus is to brainstorm and uncover all the possible causes of symptoms and signs that don’t make instant sense to the general practitioner. The goal is to help the patient get well again.

The problem is that real medicine and insurance coverage don’t allow for the time or funding that investigative medicine requires and for which the world of television fruitfully provides. A physician like television’s Dr. Gregory House, M.D. is an extremely rare find. Yet, medicine needs a Dr. House in every hospital and clinic.

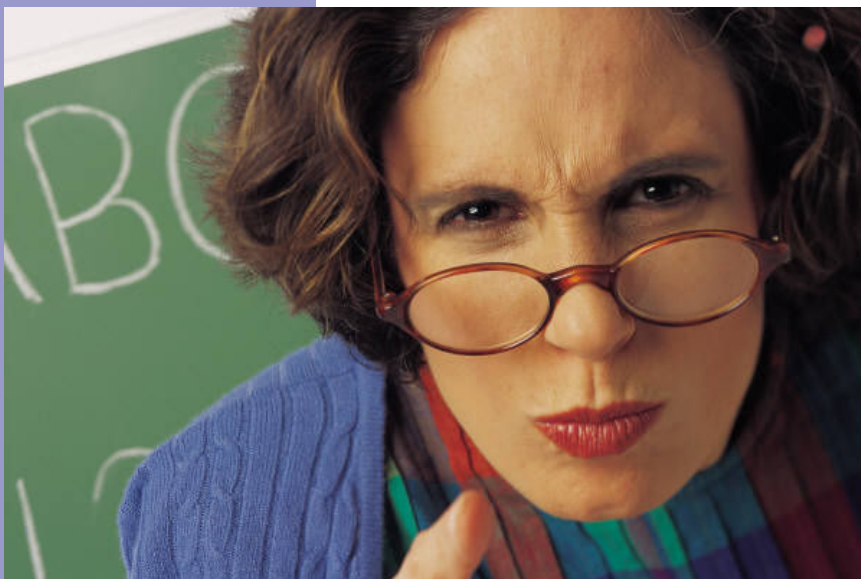
In the real world when a patient presents with symptoms that don’t fit

neatly into a quick and obvious predetermined diagnostic protocol, dismissal with a wastebasket diagnosis is increasingly common.

A wastebasket diagnosis is a vague or fake medical or psychiatric diagnosis that cannot be proven to exist by any clinical test. Such a diagnosis is often faddish and broadly inclusive to the point of being scientifically useless.

At best, receiving such a diagnosis can be frustrating when one is not feeling well and seeking a real solution to return to living life at the fullest. At worst, the treatment is useless and misleading; and, it may even be harmful as it often delays proper and legitimate care.

There are many wastebasket diagnoses. Common wastebasket diagnoses include the effects of aging, depression, anxiety, somatization, stress, and most so-called mental illnesses such as oppositional defiant disorder and attention deficit hyperactivity disorder. These are sham illnesses for which bogus treatment or medication is given.



Mental illnesses are the most common wastebasket diagnoses. There are no objective, clinical tests which can reliably and consistently prove they exist; they are defined solely by their symptoms, not by any break down of the body. In some cases, detailed interviews, and clinician observance are used to make a diagnosis. In other cases, a busy doctor may simply make an assumption that a perplexing disease process is of mental origin.

While most patients are relieved to find out what is wrong with their health so that it can be treated and they can get on with life, these diagnoses rarely seem right.

Real diseases are diagnosed and treated on the basis of symptoms and objective tests. Wastebasket diagnoses are diagnosed on the sole basis of symptoms and cannot be proven to exist, either in the patient or as a disease entity.

A big red flag with wastebasket diagnoses of mental origin is that they just don't ring true. Someone who is depressed or apathetic would know it, feel it. There would be clinical tests to prove it. Patients who object to the diagnosis are routinely said to be 'in denial' and intimidated into 'compliance'. In a classic case of coercive persuasion, these diagnoses are typically forced upon the patient, treated, and evaluated without the patient's consent under the guise of being for their own good. Improvement is rare and unproven. With no clinical tests to provide evidence that any mental illness exists, there are no objective measures for improvement. Studies have shown that antidepressant medications are no more effective than a placebo pill.

The world of psychiatry is riddled with questionable practices and violations of human rights. It is not unheard of for doctors to have patients placed on a 72 hour psychiatric hold against their will when limited thinking interferes with the logical

process of running medical tests to rule out all possible medical conditions. A 72 hour hold in a psychiatric hospital is extremely frightening, especially when one is not feeling well. Contact with family and friends is prohibited and emotions often run high, thus may be misinterpreted. Psychiatric medications may be forced on the patient altering their mental and functional capacity, therefore creating false conditions which allow for being held indefinitely.

Thomas Stephen Szasz, Professor Emeritus of Psychiatry at the State University of New York Health Science Center in Syracuse, New York, says "People who are said to "have" a mental illness can only have, at best, a "fake disease." Diagnoses of "mental illness" or "mental disorder" are passed off as "scientific categories", but they remain merely judgments to support certain uses of power by psychiatric authorities. A genuine disease must also be found on the autopsy table and meet pathological definition instead of being voted into existence by members of the American Psychiatric Association."

These vague labels may be given to the patient for non-medical reasons or when something is evidently wrong and the doctor doesn't know what it is. They may also be given to placate a concerned patient in a form of dismissal.

The unfortunate part is that a wastebasket diagnosis delays proper diagnosis and treatment in all but the most strong, aware, and persistent patients. This leaves people vulnerable to high levels of reactionary stress, anxiety, and depression from the struggle to maintain and regain a quality of life while health continues to deteriorate. When one is led to believe that mental illnesses exist and are within their power to fix, it can lead to reactionary depression when health continues to decline despite doing everything right by the fake mental illness diagnosis.

Sometimes family and friends, though well meaning, may push a wastebasket diagnosis as well. For the patient, it's usually very clear whether depression or anxiety was an issue before an illness struck. For the family, it can be unclear that stress and anxiety is a reaction to failing health. The well meaning push loved ones provide may, therefore, further interfere with finding the true cause of illness and regaining health.

In an interesting twist, people with legal and financial agendas often try to dismiss real medical conditions as wastebasket diagnoses. This is common with diseases of environmental origin such as fibromyalgia, chronic fatigue syndrome, multiple chemical sensitivity, mold illness, toxic injury, and even asthma and allergies. The difference is that these conditions all have abnormal, objective, clinical laboratory findings... something that wastebasket diagnoses such as mental illnesses lack entirely.

Patients can protect themselves by being informed, asking questions, and doing research. If a diagnosis doesn't make sense, there's probably a reason why that deserves further investigation and testing.

A doctor should always rule out all other possibilities before making a wastebasket diagnosis. A patient who presents with fatigue and is immediately diagnosed as "depressed" and prescribed an antidepressant without any testing should demand testing and seek an independent second opinion.

It never hurts to ask for clinical proof of a diagnosis and insist on testing to rule out other causes. Web MD asserts that a doctor should do a physical exam and ask for specific lab tests to determine whether the symptoms are related to a medical condition such as thyroid disease, cancer, adrenal disease, nervous system disorders, hormonal imbalances, anemia, multiple sclerosis, brain injury or tumor, stroke, reactions to medications, or heavy metal and other toxicities. Hypothyroidism, for example, is the most common disorder misdiagnosed as depression. Treating these illnesses eliminates the apparent anxiety or depression.

Some doctors may say that it's most important to treat depression or anxiety first, before testing and treating for any other medical condition. This does nothing more than delay treatment and increase suffering, both of which may lead to social, relational, and financial problems.

If, for example, a patient has undiagnosed hypothyroidism and the doctor says to treat the depression first and will only look for other causes of the symptoms when the depression is controlled, s/he has set the patient up for failure because that hypothyroidism will not go away. As long as the symptoms are being blamed on depression, the patient will never get well. A patient may spend years of trying different antidepressants and talk therapy before realizing that emotions were never the problem. Unfortunately, many antidepressant drugs have been linked to addiction, suicide, and permanent chemical changes in the brain that cannot be reversed.



**“According to the National Institute of Medicine, nearly 50% of adults suffer from a mental illness at some time in their life.”**

Yet if hypothyroidism is properly treated with thyroid hormone replacement therapy, the so-called depression and sluggishness almost immediately and magically disappear. The depressive symptoms are not caused by emotions or poorly defined and unproven chemical imbalances in the brain; they’re simply the result of insufficient thyroid hormone.

Depression is a fad of the 21<sup>st</sup> century. In fact, according the National Institute of Medicine, nearly 50% of adults suffer from a mental illness at some time in their life. When it gets to the point that more people have mental illness than not, logic stands to reason that the definition of mentally ill and normal needs serious revision.

Getting qualified, open-minded, appropriate medical care can be daunting in the face of insurance company limitations, cost cutting, inadequate physician time with patients, medical intimidation, and industry and political interference. Some recommendations include researching the possible cause of symptoms before making a medical appointment, asking for specific tests, bringing a

spouse or friend to the appointment to increase credibility and dissuade medical intimidation tactics, and asking for objective and clinical proof of the doctor’s diagnosis.

If forcefully held for an unwarranted psychiatric evaluation, it’s best to remain calm, agreeable, confident, happy, and cooperative. This is not the time to fall prey to fear and buck the system even though you’ve been misunderstood. The best thing to do is to comply, except when regulations allow you to deny medication. Get out of there as quickly as possible and get back to finding real, qualified treatment for your health.

When in doubt, get another opinion. Some doctors consider “doctor hopping” to be a sign of malingering. But the reality is that if one can’t help, you should try another and another until the condition is properly diagnosed.

It’s a shame that it often takes years to receive a proper diagnosis and treatment, nevertheless it will happen a lot faster when one is educated, informed, asks questions, and stays alert to any warning signs.



## Resources

# Patient Support & Resources

## MCS America Forums

### MCSA Public

<http://health.groups.yahoo.com/group/mcsa-public/>

Open to the general public open to discuss MCS, support, ideas, information, announcements, news and activism.

### MCS America Members Activist/Support

<http://health.groups.yahoo.com/group/mcs-america-members-support>

This group also fulfills the function of discuss support, ideas, information, announcements, and/or share personal activism like the MCSA-Public group, only with a closed membership that requires a membership application. This group also has the added benefit of being a place where individuals and other organizations and activists can engage in collaborative efforts with MCS America and being recipient to all the news feeds (see MCSA Feeds below). Members of this group are considered associate members of MCS America. Members do not operate MCS America in any way, but rather collaborate with the organization and are privy to some internal operations, activities, and events.

### MCSA Feeds

<http://health.groups.yahoo.com/group/mcsafeeds>

The purpose of this public access group is to receive daily distribution of news and research studies on multiple chemical sensitivity, chemical injury, environmental concerns, and other related environmental illnesses and disorders. Anyone can join without an application. Only the moderator posts to this group. This is not a discussion group. This group distributes about 15 articles on average each day.

### MCS Salvage and Share

<http://health.groups.yahoo.com/group/MCSA-safer-salvage-and-share>

A public access group similar to Freecycle, except it's a free recycling program for safer reusable's geared towards individuals with MCS, CFS, FM, and other related disabilities correlated with the environment. The purpose of this program is to find, give, and recycle needed "safe" or "safer" items. All items are exchanged for free. Shipping cost are arranged between donor and recipient. Anyone can join without an application.

### Multiple Chemical Sensitivities and Toxic Injury

<http://groups.google.com/group/mcs-ti>

This is a small non-Yahoo based group open to the general public to discuss MCS, support, ideas, information, announcements, news and activism.

### MCS Hawaii

<http://health.groups.yahoo.com/group/mcs-hawaii>

Open to the general public residing in Hawaii to discuss support, ideas, information, announcements, and/or share personal activism. No application is required. This group is currently recipient to all the news feeds (see MCSA Feeds above). This list is operated in part by a state subsidiary volunteer who resides in the state.

### MCS Nebraska

<http://health.groups.yahoo.com/group/MCS-Nebraska>

Open to the general public residing in Nebraska to discuss support, ideas, information, announcements, and/or share personal activism. No application is required. This list is operated in part by a state subsidiary volunteer who resides in the state. or subscribe at:

### MCS Michigan

<http://health.groups.yahoo.com/group/mcs-michigan>

Open to the general public residing in Michigan to discuss support, ideas, information, announcements, and/or share personal activism. No application is required. This list is operated in part by a state subsidiary volunteer who resides in the state.

## Support Forums Outside the MCS America Network

### 4Mom

<http://groups.yahoo.com/group/4MOM/>

According to Mt. Sinai Medical School, there are many illness' caused by toxic substances such as pesticides. They are studying the role other toxins play on the new childhood diseases triggered by environmental factors. They call this the new epidemic. Mothers of Many is for all parents with children who are ill and are affected by toxic chemicals such as Attention Deficit Disorder, Asthma, Cancer, Autism, Tourettes Syndrome, Multiple Chemicals Sensitivities (MCS), Parkinson's, and any other condition affected.

### Bay Area MCS

<http://health.groups.yahoo.com/group/bayareamcslist/>

Classified ads and notices for people with MCS (Multiple Chemical Sensitivity) in the San Francisco Bay Area.

### CFS CFIDS ME

[http://health.groups.yahoo.com/group/CFS\\_CFIDS\\_ME/](http://health.groups.yahoo.com/group/CFS_CFIDS_ME/)

This Group is to promote friendly discussion about places where people have gone and feel more or less recovered from CFS/ME/CFIDS.

### Chemical Disability Australasian NETWORK

<http://groups.yahoo.com/group/CDANET/>

A Discussion/Chat/Mutual help list run by and for the chemically disabled.

### CMCS-EI Christian MCS, CFS, FM, and EI Group

<http://health.groups.yahoo.com/group/CMCS-EI/>

We are a Christian group who have invisible illnesses.

### Creative Canaries Community

<http://health.groups.yahoo.com/group/CreativeCanariesCommunity>

This group is an online meeting place for creative artists with Chemical Sensitivities.

**Detox**

<http://health.groups.yahoo.com/group/mcs-america-members-support>

"Detox" is a group to serve chemically injured, environmentally ill, multiple chemical sensitivity, and related illness such as chronic fatigue, candidiasis, hypoglycemia, lupus, and others.

**Disinissues**

<http://groups.yahoo.com/group/Disinissues/>

The purpose of Disinissues is to share experience and advice about the processes of obtaining and maintaining Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), and long-term disability insurance. The group is targeted mainly towards those with invisible disabilities, such as CFIDS and other conditions not on Social Security's Listing of Impairments.

**EMF Refugee**

<http://health.groups.yahoo.com/group/emfrefugee/>

This ML has been created with the intent of bringing refugees together in countries around the world to form their own EMF-free communities in natural environments where they can heal and create healing environments for the Earth and others.

**Environmental Illness 001**

[http://health.groups.yahoo.com/group/environmental\\_illness001/](http://health.groups.yahoo.com/group/environmental_illness001/)

This group is dedicated to curing / resolving all issues related to Environmental Illness, including but not limited to: Multiple Chemical Sensitivity (MCS), Multiple Food Allergy, Leaky Gut Syndrome, Candida, Epstein Barr Virus, Chronic Fatigue, Fibromyalgia, Heavy Metal Poisoning, Porphyria, endocrine system dysregulation, etc.

**eSens - Electrical Sensitivity**

<http://health.groups.yahoo.com/group/eSens/>

Do you feel ill when you're near computers, cell phones, fluorescent lights, or wireless internet? If so, you may have "electrical sensitivity".

**Gasslist-L (Glutaraldehyde, Aldehyde, and Solvent Sensitivity)**

<http://www.ncchem.com/snftaas/gasslist.htm>

This list has been established to serve persons interested in Glutaraldehyde, Aldehyde, and Solvent Sensitivity, especially darkroom personnel, radiographers, and diagnostic medical sonographers. The purpose of the list is to promote internet-wide exchange of research and information.

**Green Canary**

<http://groups.yahoo.com/group/GreenCanary>

This list is dedicated to a life free from toxic chemicals, and the health problems that they can cause.

**Immune**

<http://immuneweb.org/lists/immune.html>

This is the list for support and information about multiple chemical sensitivities, chronic fatigue syndrome, fibromyalgia, lupus, multiple sclerosis, porphyria, allergies, asthma, and other immune-related ailments.

**Immune Parenting**

<http://groups.yahoo.com/group/immune-parenting/>

This list is for both men and women who have Multiple Chemical Sensitivity, Chronic Fatigue Syndrome, Fibromyalgia, autoimmune disorders, or other immune system medical issues--or their partners--who are parents, pregnant, trying to conceive, or who are thinking about parenthood.

**Live Chat at the Health and Environment Resource Center**

<http://www.herc.org/chat>

This chat room is not associated with any group. It is unmoderated and no password is required. Chat Times: Saturday - 7 pm ET, 6 pm CT, 5 pm Mtn, 4 pm Pac; Monday - 9 pm ET, 8 pm CT, 7 pm Mtn, 6 pm Pac; Wednesday - 8 pm ET, 7 pm CT, 6 pm Mtn, 5 pm Pac.

**MCS Canada**

<http://health.groups.yahoo.com/group/MCS-Canada/>

This group was formed to assist patients and concerned parties from all nationalities learn to cope with environmental injury, including disorders such as MCS, ME, CFS, FM, Lyme, Lupus, GWS, PPS, as well as related and associated illnesses.

**MCS Canadian Sources**

<http://groups.yahoo.com/group/MCS-CanadianSources>

MCS Canadian Sources is a support, information and resource exchange for those living and coping with Multiple Chemical Sensitivity (MCS), Environmental Illness (EI), or Chemical Injury (CI).

**MCS Photography**

<http://health.groups.yahoo.com/group/MCSphotography/>

MCS Photography is for those with multiple chemical sensitivity who capture and share the world and their life through photography.

**MCS Recycle**

<http://groups.yahoo.com/group/MCSRecycle/>

The objective of this group is to be able to share with each other items that are chemical free and have been used in a non-toxic environment. This group is planet-wide.

**MCS Safe Shelter USA**

<http://health.groups.yahoo.com/group/mcssafeshelterusa/>

Short-term and long-term housing for people with MCS (Multiple Chemical Sensitivity). Check our database for listings by state. Find rentals, hotels, and housing to purchase.

**MCS Singles**

<http://groups.yahoo.com/group/mcs-singles>

Addresses the unique challenges of living alone without help as a single with MCS. Examines solutions, provides a place for general discussion, and is a resource for peer support.

**MCS Survivors**

<http://communityzero.com/mcsurvivors>

For those who experience environmental illness or multiple chemical sensitivities (MCS), here is a place to gather, exchange ideas, links to helpful websites, even have live chats. Enjoy!

**MCS Toxic Injuries**

<http://health.groups.yahoo.com/group/MCS-Toxic-Injuries/>

MCS-Toxic-Injuries is a self-moderated, secular, apolitical newsgroup for toxically-injured environmentally sensitive people to support one another and exchange coping methods, treatments and experiences.

**MCS Village**

<http://health.groups.yahoo.com/group/MCSVillage/>

The purpose of this group is to discuss the feasibility of building a village(s) or community in which MCS/EI patients can live safely, and to provide a forum to discuss the legal, medical, geographic, architectural, social and funding issues.

**MCS Writers Group**

<http://health.groups.yahoo.com/group/mcswritersgroup/>

A place for writers who have chemical sensitivities (or chemical injury) to share their stories and articles, work on and develop public writing skills, exchange editing skills and perspective, and develop ideas in order to bring awareness and education to the published world about what it is like to live with MCS/ES/CI/EI.

**Midwest Oasis MCS E-mail Support**

<http://health.groups.yahoo.com/group/MO-MCS/>

Midwest Oasis MCS E-mail Support is the e-mail arm of the Midwest Oasis MCS Support Group. Although people from all geographical areas are welcome to join, a partial focus of this list will be discussion of regional issues affecting MCS (Multiple Chemical Sensitivity) in Missouri and other Midwestern states.

**Multiple Chemical Sensitivity (Chemical Sensitivity, Porphyrin & CO)**

<http://health.groups.yahoo.com/group/MultipleChemicalSensitivity/>

Discussion group where people afflicted with Chemical Sensitivity, Chronic Carbon Monoxide Poisoning &/or Disorders of Porphyrin Metabolism can talk about their illness, inquire with others on avoidance, methods of cleaning & products one can use for necessary hygiene.

**Old Dominion MCS-FMS\_CFIDS Support Group · A Virginia Fibro MCS CFIDS Group**

[http://health.groups.yahoo.com/group/OldDominionMCS-FMS\\_CFIDSsupportgroup/](http://health.groups.yahoo.com/group/OldDominionMCS-FMS_CFIDSsupportgroup/)

Too many people in Va. have Fibromyalgia, Myofascial Pain Syndrome, CFIDS, Gulf War Syndrome (GWS), ES, and Multiple Chemical Sensitivity. The group owner wanted to create an informative, supportive group for Virginians, and others.

**Planet Thrive**

<http://www.planetthrive.com/>

A dynamic online community for those activity seeking answers and support for a variety of health concerns. A place where people around the world help each other get well and stay well.

**Sick Buildings**

<http://health.groups.yahoo.com/group/sickbuildings/>

Toxic molds are running rampant in our homes, offices and schools. Exposure to mycotoxins has been linked to the death of infants, as well as immune-compromised adults. Despite increasing reports of mold-induced illness and health problems associated with mold exposure, our public health agencies offer little, if any support or funding for research into this growing problem.

**Sprayno**

<http://groups.yahoo.com/group/sprayno/>

This is a list to exchange information regarding environmental issues in the northern suburbs and NY metro area focusing especially on encouraging activism in this area and educating the public about toxic effects of pesticide/herbicide usage.

**Tenth Paradigm Society**

<http://health.groups.yahoo.com/group/TenthParadigmSociety/>

The Tenth Paradigm Society mailing list is for the dissemination and discussion of information concerning the NO/ONOO- cycle mechanism, a new paradigm of human disease, proposed by Martin L. Pall, Ph.D. Dr. Pall adopted the term "Multisystem Illness" to describe

those diseases that fall under the tenth paradigm. They include: Chronic Fatigue Syndrome (CFS/CFIDS/M.E.), Multiple Chemical Sensitivity (MCS), Fibromyalgia (FM/FMS), Post-Traumatic Stress Disorder (PTSD), and Gulf War Syndrome (GWS).

**The Sanctuary**

<http://www.mcs-international.org/phpBB3/>

MCS-International.Org's Holistic Support Forums For sufferers of Multiple Chemical Sensitivity and all other forms of Chemical Injury and Environmental Illness.

**Toxics Discussion**

<http://groups.yahoo.com/group/ToxicsDiscussion/>

If you're keen on a toxics-safe future for the planet, then this is the discussion group for you. Toxics are defined here as naturally occurring or man-made chemicals (elements/compounds/mixtures) that have a toxic effect.

**WSMCSN (Washington State MCS Network)**

<http://groups.yahoo.com/group/WSMCSN>

WSMCSN is a decentralized network of groups and individuals in Washington State who share information about the issues of Multiple Chemical Sensitivity.

**Additional Forum Listing Webpage**

<http://www.mcs-america.org/forums>

## Physician & Dentist Referral Lists

**Physician Referral List by State**

<http://mcs-america.org/doctorlist.pdf>

Some of the physicians on this list specialize in MCS, others in FM and CFS. It is recommended that patients and doctors consult with one another prior to beginning any treatment to ensure understanding of the patient's needs and compatibility of patient and physician.

**Dentist Referral List by State**

<http://mcs-america.org/dentistlist.pdf>

Some of the dentists on this list are specifically familiar with MCS, others are not. It is recommended that patients and dentists consult with one another prior to beginning any treatment to ensure understanding of the patient's needs and compatibility of patient and dentist.

## Air Quality Reports

**Air Now Air Quality Reports**

<http://www.airnow.gov/>

**EPA State and Regional Indoor Environments Contact Information**

<http://www.epa.gov/iaq/wherelive.html>

**The National Association of Clean Air Agencies 4 Cleaner Air**

<http://www.4cleanair.org/>

**American Lung Association: State of the Air**<http://lungaction.org/reports/stateoftheair2007.htm>**Current Local & National Allergy Levels**<http://pollen.com/Pollen.com.asp>**Scorecard: Pollution Index by Area**<http://www.scorecard.org/>**Toxmap Hazardous Waste Site Locations**<http://toxmap.nlm.nih.gov/toxmap/main/index.jsp>**USA Smoke/Fire Pollution Map**<http://www.firedetect.noaa.gov/viewer.htm>**Antenna Search (USA)**[http://mcs-america.org/index\\_files/www.AntennaSearch.com](http://mcs-america.org/index_files/www.AntennaSearch.com)**EPA Safe Drinking Water Information by State**<http://www.epa.gov/safewater/dwinfo/>**EPA Radon Zone Map**<http://www.epa.gov/radon/zonemap.html>

## Brochures

**Air Fresheners & Plug-Ins**<http://mcs-america.org/airfresh.pdf>**Chemical in Air Fresheners Reduces Lung Function**<http://mcs-america.org/lung.pdf>**Consequences of Childhood Chemical Injury Poster By Margaret S. O'Nan**<http://mcs-america.org/onan.pdf>**Electrosensitivity Brochure by Kato Yasuko**<http://mcs-america.org/KatoYasukoElectrosensitivityBrochure.doc>**Fabric Softener**<http://mcs-america.org/fabricsoftener.pdf>**Fragrances**<http://mcs-america.org/fragrances.pdf>**Grandma's Cupboard: General Cleaning Solutions**<http://www.mcs-america.org/general.pdf>**Grandma's Cupboard: Kitchen Cleaning**<http://www.mcs-america.org/kitchen.pdf>**Grandma's Cupboard: Personal Care**<http://www.mcs-america.org/personal.pdf>**Grandma's Cupboard: Laundry**<http://www.mcs-america.org/laundry.pdf>**Household Mold brochure from Quebec government**<http://publications.msss.gouv.qc.ca/acrobat/fl/documentation/2002/02-214-01A.pdf>**ILRU: Understanding & Accommodating People with MCS in Everyday Living**<http://mcs-america.org/ilru.pdf>**Indoor Air Chemistry**<http://mcs-america.org/indoorair.pdf>**Interior Design and MCS**<http://mcs-america.org/interior.pdf>**Jill Mellum: Breathe Easier, Hold the Fragrances Brochure**<http://mcs-america.org/fragrancefacts.pdf>**MCS Homebuyer's Questionnaire**<http://mcs-america.org/Homebuyer'sQuestionnaire.pdf>**MCS Task Force of New Mexico Brochure**<http://mcs-america.org/newmexico.pdf>**MCS Public Accommodations**<http://www.nettally.com/prusty/PUBLIC%20ACCOMMODATIONS.pdf>**MCS Statistics**<http://www.mcs-america.org/MCSStatistics.pdf>**No Scents Makes Sense Brochure**<http://www.nb.lung.ca/pdf/NoScentsMakeSense.pdf>**Theory on the Cause of MCS: Peroxynitrite and Nitric Oxide**<http://www.mcs-america.org/cause.pdf>**Understanding Multiple Chemical Sensitivity**<http://www.mcs-america.org/understanding.pdf>**Use of Baking Soda as a Fungicide**<http://mcs-america.org/fungicide.pdf>**Vaccine Poster - Are We Poisoning Our Children?**<http://www.generationrescue.org/pdf/080212.pdf>**Visiting a Person with MCS**<http://mcs-america.org/visiting.pdf>**What you should know before visiting a person who has NRLA and/or MCS**<http://mcs-america.org/VisitingNRLA-MCS.pdf>

## Signs

**Acute Toxic Effects of Fragrances Business Card**<http://mcs-america.org/acutetoxiceffectsoffragrancescard.pdf>**Chemical Awareness Ribbon**<http://mcs-america.org/ribbon.gif>

**Electrosensitivity Sign - Please Turn Off Your Cell Phone**

<http://mcs-america.org/KatoYasukoElectrosensitivitySignTurnOffYourCellPhone.pdf>

**Facemask on Tweety**

<http://mcs-america.org/tweety.jpg>

**Fragrance Free Sign: Brooks University**

[http://www.brocku.ca/oehs/graphics/Fragrance\\_Free\\_Sign.pdf](http://www.brocku.ca/oehs/graphics/Fragrance_Free_Sign.pdf)

**No Scents Makes Sense Sign**

<http://mcs-america.org/scentsign.pdf>

**No Latex Sign by Jane Sagmoe**

<http://mcs-america.org/nolatemask.JPG>

**You Could Be Next Sign**

<http://mcs-america.org/nextsign.pdf>

**Want to Put Your Friends and Family in Jail?**

<http://mcs-america.org/jail.pdf>

**Wood Smoke Trespass Flyer 8 1/2 x 11**

<http://mcs-america.org/woodsmokeflyer.pdf>

## Activist Materials

**Fragrances on Mail and/or Catalogs**

<http://mcs-america.org/FragrancedMailCatalogBillsLetterforActivists.doc>

**Air Freshener Use**

<http://www.mcs-america.org/customairfreshenerletter.doc>

**Use of Fragrance, Cologne, and Perfume**

<http://mcs-america.org/UseofFragranceLetterforActivists.doc>

**Fabric Softener Emissions**

<http://www.mcs-america.org/LetterAboutFabricSoftener.doc>

**Letter to State Representatives to Ban Woodsmoke**

<http://mcs-america.org/woodsmoke.doc>

**Letter to Doctors and Medical Boards Supporting MCS as a biological Illness (fully cited and scientifically supported)**

Website: <http://mcs-america.org/MCSPositionStatement.htm>

PDF: <http://mcs-america.org/MCSPositionStatement.pdf>

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**Request for Accommodations Under the Americans with Disabilities Act**

<http://www.mcs-america.org/RequestforAccommodation.doc>

## Public Service Announcements

**Public Service Announcement #1**

**Air fresheners have been pulled off thousands of shelves nation-wide!**

<http://www.mcs-america.org/AirFreshenerPSA1.pdf>

**Public Service Announcement #2**

**When you use fragranced products, did you know you are wearing toxic chemicals!?**

<http://www.mcs-america.org/WhenYouUseFragrancedProductsPSA2.pdf>

**Public Service Announcement #3**

**Secondhand Fragrances are Like Secondhand Smoke!**

<http://www.mcs-america.org/SecondHandFragrancesPSA3.pdf>

**Public Service Announcement #4**

**Scented laundry detergents and fabric softeners pollute indoor and outdoor air!**

<http://www.mcs-america.org/ScentedLaundryDetergentsPSA4.pdf>

**Public Service Announcement #4 (SPANISH)**

**Scented laundry detergents and fabric softeners pollute indoor and outdoor air!**

<http://mcs-america.org/mcsamerica/ScentedLaundryDetergentsPSA4Spanish.pdf>

**Public Service Announcement #5**

**Wood Smoke... The Other Secondhand Smoke!**

<http://www.mcs-america.org/WoodSmokePSA5BurningIssues.pdf>

**Public Service Announcement #6**

**Fragrances undermine public health!**

<http://www.mcs-america.org/FragrancesPSA6.pdf>

**Public Service Announcement #7**

**Fragranced Laundry Products Pollute Our Air**

<http://mcs-america.org/PSA7FragrancedLaundry.pdf>

## Clothing & Novelties for Activism

**MCS America Store for the Environment**

<http://www.mcs-america.org/MCSstore..htm>

**Zona's T-Shirts and Stuff Zone**

<http://members.shaw.ca/zonaszone/shop/tshirts.html>

## Virtual & Work-at-Home Jobs

**Agent, Staffing at Home**  
<http://www.staffingathome.com/>

**Agent, West at Home**  
<http://www.westathome.com/>

**Agent, Working Solutions**  
<http://www.workingsol.com/home.htm>

**Bolger, PayPerPost.com**  
[http://payperpost.com/blogger\\_signup.html](http://payperpost.com/blogger_signup.html)

**Call Center Representative, Accolade Support**  
<http://www.accoladesupport.com/>

**Call Center Representative, Overflow USA**  
<http://www.overflowusa.com/>

**Call Center Representative, Overflow USA**  
<http://www.overflowusa.com/>

**Caller Employee, Customer Loyalty Concepts**  
<http://www.customloyal.com/Employment.aspx>

**Chef Instructor, Chefs Line**  
<http://www.chefsline.com/>

**Customer Care, VIP Desk**  
<http://www.vipdesk.com/info/default.asp>

**Customer Service, Alpine Access**  
<http://www.alpineaccess.com/external/index.html>

**Editor, EditFast.com**  
<http://www.editfast.com/>

**Expert, JustAnswer Corp**  
<http://www.justanswer.com/>

**Freelancer, Team Double-Click**  
<http://www.teamdoubleclick.com/freelance.html>

**Guide, About .com**  
<http://beaguide.about.com/>

**Guide, ChaCha**  
<http://www.chacha.com/>

**Home Agent, Convergys**  
<http://www.convergysworkathome.com/>

**Independent Call Center Agent, LiveOps**  
<http://tinyurl.com/5xfv7n>

**Telemarketing, Intrep Sales Partners**  
<http://www.intrep.com/>

**Online Juror, eJury.com**  
<http://www.ejury.com/>

**Online Juror, OnlineVerdict.com**  
<http://onlineverdict.com/>

**Online Juror, Trial Practice Inc.**  
<http://trialpractice.com/>

**Third Party Verifier, BSG Payments LLC**  
<http://tinyurl.com/4vcldx>

**Virtual Assistant, Virtual Office Temps**  
<http://virtualassistantjobs.com/>

**Virtual Services, Arise Virtual Solutions**  
<http://www.arise.com/Content/default.asp>

**Writer, Associated Content**  
<http://www.associatedcontent.com/>

**Writer, CyberEdit Inc.**  
<http://www.cyberedit.com/>

**Writer, MyEssays.com**  
<http://www.myessays.com/sell.php>

**National Telecommuting Institute, Inc.**  
<http://www.nticentral.org/>



## Environmentally Safer Housing

**Allergy And Environmental Health Association Of Quebec (AEHAQ) Environmentally Adapted, Social Housing Project For People Suffering From Environmental Sensitivities**  
[http://www.aeha-quebec.ca/bb\\_housingproject.htm](http://www.aeha-quebec.ca/bb_housingproject.htm)

**Barrhaven Non-Profit Housing Inc. Environmental Sensitivity Units**  
 Steepleview Crossing,  
 3001 Jockvale Road, Nepean, Ontario, K2J 4E4  
 (613) 823-6230 Fax: (613) 825-7724  
<http://ehaontario.ca/barrhaven-housing.htm>  
<http://www.bnphi.org/es.htm>

**Canada-wide Housing Connection**  
 1-613-278-0463  
<http://ehaontario.ca/interview.htm>

**Ecology House, San Rafael, California (built in 1994)**  
 375 Catalina Blvd  
 San Rafael, CA 94901  
 (415) 456-4453  
<http://www.tikvah.com/cc/eh>  
[eh@ecologyhouse.net](mailto:eh@ecologyhouse.net)

**Escalante House**  
 P.O. Box 652  
 Escalante UT 84726  
 Phone/Fax: (435) 826-4778  
[toripat@color-country.net](mailto:toripat@color-country.net)

**Environmentally Friendly Housing Partnership**  
 Pride and Joy Condos -- North  
 5685 South AIA Highway  
 Melbourne Beach, FL 32951  
 (321) 409-8233 - Phone  
 (321) 725 4883 -- FAX  
<http://www.prideandjoycondos.com/>  
[damianorob@aol.com](mailto:damianorob@aol.com)

**Green Homes for Sale**  
<http://greenhomesforsale.com/>

**Safe Haven Community Housing**  
 P.O. Box 25281  
 Portland, Oregon 97298  
[judiths@teleport.com](mailto:judiths@teleport.com)  
<http://www.geocities.com/safehavencommunity/#ntact>

**The Pandora Initiative (Canada)**  
<http://tier10.com/>

**Quail Haven - MCS Housing**  
 Just North of Tucson, AZ  
 Call Diane Ensign for details:  
 May through January call: (406) 586-3658 (Montana).  
 January through May call: (520) 825-7276 (Tucson).  
<http://madelinx.tripod.com/>

**Seagoville Ecology Housing**  
 15126 Beckett Road  
 Seagoville, Texas 75159  
 (972) 287-2059 Fax: (972) 287-7682  
<http://www.ehcd.com/resources/ecologyhousing.html>

**The Natural Place Environmental Residence and Hotel**  
 1962 NE 5th St.  
 Deerfield Beach, FL 33441  
 954-428-5438  
<http://www.thenaturalplace.com/default.htm>

## Safer Building & Regulations

**Alliance for Healthy Homes**  
<http://www.afhh.org/>

**American Lung Association: Resources & Referrals for and from the Master Home Environmentalist program.**  
<http://tinyurl.com/5vbk9e>

**Architectural House Plans Healthy Homes Construction Guidelines**  
 Information: <http://tinyurl.com/6dteuz>  
 Booklet: <http://www.architecturalhouseplans.com/products/>

**Assessment of the Indoor Air Quality of a Suite for an Environmentally Hypersensitive Occupant**  
<http://mcs-america.org/IAQforanEIOccupant.pdf>

**Considerations For Safer Construction And Renovation By Preston Sturgis**  
<http://www.environmentalhealth.ca/w9394safer.html>

**Dr. Grace Ziem's Environmental Control Plan for MCS Patients**  
<http://www.mcsrr.org/resources/articles/S3.html>

**The Eco Building Guild**  
<http://www.ecobuilding.org/>

**The Effect of Housing on Individuals with Multiple Chemical Sensitivities**  
<http://tinyurl.com/6gor7u>

**Building for Health Materials Center**  
<http://www.buildingforhealth.com/>

**Ecohaus**  
<http://www.ecohaus.com>



**Heal Your Home Center**

<http://tinyurl.com/6dteuz>

**The Healthy Housing Coalition: Basic Needs for Rental Housing for Chemically Sensitive Persons**

<http://www.herc.org/hhc/Basicrentalneeds.html>

**Healthy Housing Practical Tips**

<http://tinyurl.com/5bfgzd>

**IEQ Indoor Environmental Quality**

[http://ieq.nibs.org/ieq\\_project.pdf](http://ieq.nibs.org/ieq_project.pdf)

**International Institute for Building Biology and Ecology**

<http://www.buildingbiology.net/>

**LEED® Canada Green Building Rating System**

<http://www.cagbc.org/leed/systems/index.htm>

**The Medical Perspective on Environmental Sensitivities: Building codes, regulations and guidelines**

<http://tinyurl.com/6zmqh>

**Moving House - Things To Look For If You Suffer From MCS**

<http://www.drmyhill.co.uk/article.cfm?id=147>

**Multiple Chemical Sensitivity (MCS): The Controversy and Relation to Interior Design**

<http://www.idec.org/publication/IIArticleMCS.pdf>

**Optimum Environments for Optimum Health & Creativity: Designing and Building a Healthy Home or Office, William J. Rea, M.D.**

[http://www.ehcd.com/books/home\\_building\\_designing.html](http://www.ehcd.com/books/home_building_designing.html)

**Recommended Architectural Features for Multi-Family Housing to Better Accommodate Chemical and Electrical Sensitivities, Susan Molloy, M.A.**

<http://www.ctaz.com/~bhima/recommcshous.htm>

**Research House for the Environmentally Hypersensitive**

<http://tinyurl.com/5prv3>

**Safer Construction Tips for the Environmentally Sensitive**

<http://tinyurl.com/5tgx7l>

**Understanding & Accommodating People with Multiple Chemical Sensitivity in Independent Living, Chapter 4, The Housing Challenge in MCS**

<http://www.ilru.org/html/publications/bookshelf/MCS.html#chapter4>

**Disclaimer**

*This data is for informational purposes and is not intended to replace the examination, diagnosis and treatment of a licensed physician and no such claims are inferred. MCS America will not be responsible for misuse of this information or the misuse of any information provided by its member organizations. Articles, citations, links and information are not necessarily the opinion of MCS America and printing does not constitute MCS America's endorsement.*

**U.S. Department of Housing and Urban Development National Healthy Homes Conference**

<http://www.hud.gov/offices/lead/2008NHHC.cfm>

**U.S. Department of Housing and Urban Development Healthy Housing Reference Manual**

<http://tinyurl.com/5apna5>

**Builders and Building Material Suppliers**

**Green Building Store**

<http://www.greenbuildingstore.co.uk/naturalpaints.php>

**Healthy Buildings, Inc (Air Quality Testing)**

[http://www.healthybuilding.com/html/about\\_us.html](http://www.healthybuilding.com/html/about_us.html)

**Heating and Cooling Options for the Environmentally Sensitive**

<http://eiwellspring.org/HeatingAndCooling.htm>

**Resources for the Chemically Injured: Building Materials**

<http://www.lassentech.com/eibuld.html>

**Tad Taylor's Healthy Homes, LLC**

<http://www.healthy-homes.com/>

**Other Housing Resources**

**Extreme Home Makeover**

<http://abc.go.com/primetime/xtremehome/index?pn=apply>

**Ontario Human Rights Code: Policy and Guidelines on Disability and the Duty to Accommodate Non-Evident Disabilities**

<http://tinyurl.com/6ejep8>

**Residential Rehabilitation Assistance Program for Persons with Disabilities (Canada).**

[http://www.cmhc-schl.gc.ca/en/co/prfinas/prfinas\\_003.cfm](http://www.cmhc-schl.gc.ca/en/co/prfinas/prfinas_003.cfm)

News

# Community News

## Subscribe to News & Media Articles

To receive free daily news and research feeds about MCS & the environment as they happen, send an e-mail to:

[mcsafeeds-subscribe@yahoogroups.com](mailto:mcsafeeds-subscribe@yahoogroups.com)

Petition to Ban scented products in the Olympics and affiliated organizations

<http://www.gopetition.com/petitions/ban-scented-products-in-the-olympics-and-affiliated-org.html>

VIDEO: Pharma Not in Business of Health, Healing, Cures, Wellness

<http://thetruthaboutmcs.blogspot.com/2011/05/pharma-not-in-business-of-health.html>

VIDEO: Choose Friendships Over Fragrances

<http://thetruthaboutmcs.blogspot.com/2011/05/choose-friendships-over-fragrances.html>

Environmental Sensitivities: Sex and Gender-based Analysis of this topic

<http://www.womenshealthdata.ca/category.aspx?catid=172&rt=2>

Solar panels win reprieve in EU toxic substance ban

<http://af.reuters.com/article/energyOilNews/idAFLDE74Q0QP20110527>

Can a Healthy Lawn and a Healthy Liver Co-Exist?

<http://www.liversupport.com/wordpress/2011/05/can-a-healthy-lawn-and-a-healthy-liver-co-exist/>

Mercury in skin-lightening creams

<http://www.startribune.com/lifestyle/wellness/122598954.html>

Environmental health conference in Montreal May 28

<http://blogs.montrealgazette.com/2011/05/26/environmental-health-conference-in-montreal-may-28/>

Should we drug the drinking water? Adding lithium to the taps 'could lower suicide rates'

<http://www.dailymail.co.uk/health/article-1390732/Adding-Lithium-drinking-water-lower-suicide-rates.html>

Cans bring BPA to dinner, FDA confirms

[http://www.sciencenews.org/view/generic/id/74809/title/Cans\\_brings\\_BPA\\_to\\_dinner,\\_FDA\\_confirms](http://www.sciencenews.org/view/generic/id/74809/title/Cans_brings_BPA_to_dinner,_FDA_confirms)



# Featured Research Studies

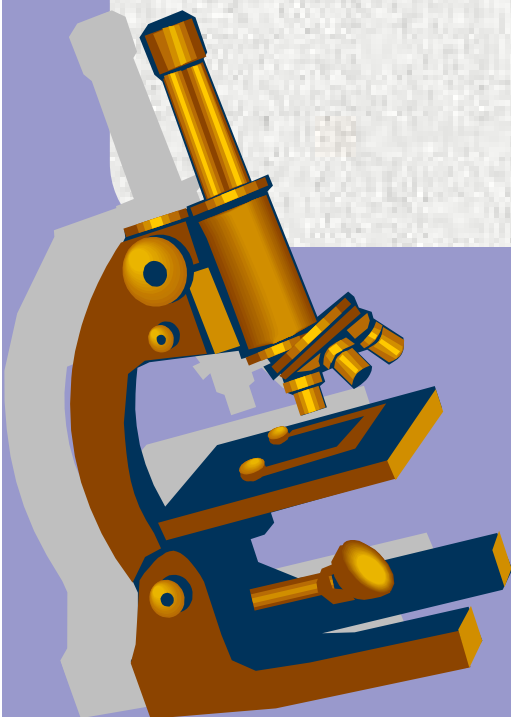
## **Glutathione S-transferase T1 (GSTT1) and M1 (GSTM1) genes polymorphism and risk of bronchial asthma in children**

Asmaa Ahemed Abd El-Aal, Mostafa M. El-Nashar and Amal H. El-Sissy.  
Comparative Clinical Pathology.  
DOI: 10.1007/s00580-011-1262-z

### Abstract

Oxidative stress is thought to be involved in the pathogenesis of asthma. Glutathione S-transferase (GST) enzymes play an important role in the antioxidant defence mechanism and therefore may influence asthma risk. Polymorphism of GSTT1 and GSTM1 genes has been associated with asthma in children and adults, but results are inconsistent across studies. The aim of the present study was to examine the association of GSTT1 and GSTM1 gene genotypes and the risk of asthma among 44 stable asthmatic children in comparison to 30 healthy control subjects.

Genotyping was performed using the multiplex PCR technique. GSTT1 null genotype was significantly associated with an increased risk of asthma by more than 9-fold. GSTM1 polymorphism did not appear to play a major role in the development of bronchial asthma in children. Neither was associated with patients' phenotype.



## Urban air pollution and emergency room admissions for respiratory symptoms: a case-crossover study in Palermo, Italy.

Tramuto F, Cusimano R, Cerame G, Vultaggio M, Calamusa G, Maida CM, Vitale F. Environ Health. 2011 Apr 13;10(1):31. [Epub ahead of print]

### Abstract

#### BACKGROUND:

Air pollution from vehicular traffic has been associated with respiratory diseases. In Palermo, the largest metropolitan area in Sicily, urban air pollution is mainly addressed to traffic-related pollution because of lack of industrial settlements, and the presence of a temperate climate that contribute to the limited use of domestic heating plants. This study aimed to investigate the association between traffic-related air pollution and emergency room admissions for acute respiratory symptoms.

#### METHODS:

From January 2004 through December 2007, air pollutant concentrations and emergency room visits were collected for a case-crossover study conducted in Palermo, Sicily. Risk estimates of short-term exposures to particulate matter and gaseous ambient pollutants including carbon monoxide, nitrogen dioxide, and sulfur dioxide were calculated by using a conditional logistic regression analysis.

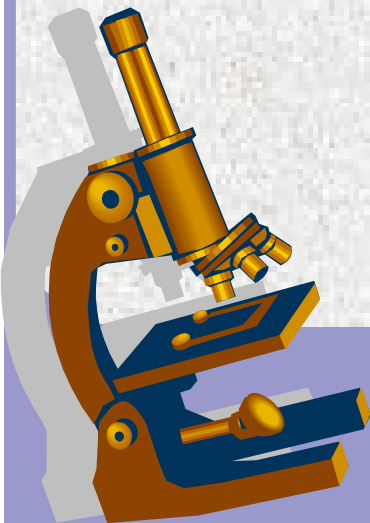
#### RESULTS:

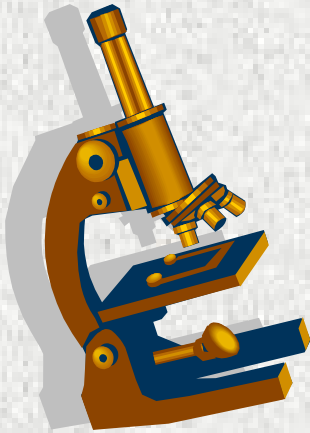
Emergency departments provided data on 48,519 visits for respiratory symptoms. Adjusted case-crossover analyses revealed stronger effects in the warm season for the most part of the pollutants considered, with a positive association for PM10 (odds ratio = 1.039, 95% confidence interval: 1.020 - 1.059), SO2 (OR=1.068, 95%CI: 1.014 - 1.126), nitrogen dioxide (NO2: OR=1.043, 95%CI: 1.021 - 1.065), and CO (OR=1.128, 95%CI: 1.074 - 1.184), especially among females (according to an increase of 10  $\mu\text{g}/\text{m}^3$  in PM10, NO2, SO2, and 1  $\text{mg}/\text{m}^3$  in CO exposure). A positive association was observed either in warm or in cold season only for PM10.

#### CONCLUSIONS:

Our findings suggest that, in our setting, exposure to ambient levels of air pollution is an important determinant of emergency room (ER) visits for acute respiratory symptoms, particularly during the warm season. ER admittance may be considered a good proxy to evaluate the adverse effects of air pollution on respiratory health.

PMID: [21489245](https://pubmed.ncbi.nlm.nih.gov/21489245/) [PubMed - as supplied by publisher]





## Isolation and lack of access in multiple chemical sensitivity: A qualitative study.

Gibson PR, Sledd LG, McEnroe WH, Vos AP. Nurs Health Sci. 2011 May 20. doi: 10.1111/j.1442-2018.2011.00606.x. [Epub ahead of print]

Source

Department of Psychology, James Madison University, Harrisonburg, Virginia, USA.

Abstract

This paper describes a qualitative interview study of 26 persons with multiple chemical sensitivity (MCS), also referred to as chemical intolerance. We used a phenomenological perspective and planned to focus on the impact of MCS on relationships, but found that difficulty with accessing safe spaces at times prevented relationships by limiting access to personal interactions. Thus, persons with MCS either lost or were unable to cultivate new relationships as a result of lack of spatial access. Others' lack of understanding and refusal to make accommodations at times denied spatial access to those with MCS. In this way, relationships (relationality) and spatial access (spatiality) interacted with one another to keep persons isolated. In this paper, we describe informants' detailed experience of living with chemical intolerance in a culture where chemical exposures are commonplace.

PMID: [21595819](https://pubmed.ncbi.nlm.nih.gov/21595819/) [PubMed - as supplied by publisher]

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