Accommodation of EHS/MCS Patients At Health Care Facilities

My name is Shelley Wright. I have been living with EHS and MCS (Electromagnetic Hypersensitivity and Multiple Chemical Sensitivity), for 11 years. These disabilities often prohibit me from having safe access to most public places. [http://www.emfwise.com/ehs.php](http://www.emfwise.com/ehs.php)

I was pleased with the care and concern exhibited by hospital staff, but there are areas I’d like to identify which can greatly improve accessibility for electromagnetic hypersensitive and multiple chemical sensitive patients who are seeing care at a hospital. I am hoping that other health care facilities in the area will follow your excellent example by providing caring accommodations for environmentally sensitive patients.

I hope this information will help you understand these environmental sensitivities. My emphasis is on EHS, because it is less understood. I am providing you with information about the triggers, symptoms, stigmas and misconceptions for EHS, so you can develop appropriate accessibility strategies, which are not currently implemented.

Often patients sensitive to RF wireless devices in the microwave range (cell phones, etc.) are also chemically sensitive (car exhaust, perfumes, laundry detergents, etc.)

Visiting public places where WiFi signals are prolific is difficult and can be dangerous for heart sensitive EHS patients, including children. The electromagnetic signals from access points (hubs) and cell phones can interfere with the electromagnetic signals of the heart in some hyper-heart sensitive patients and can lead to heart arrhythmia, stroke and possibly heart failure. Defibrillators are not 100% effective.

I understand that through your Accessibility Plan in accordance to the Accessibility for Ontarians with Disabilities Act, that you are committed to identifying, removing and preventing barriers for disabled persons. I understand this multi-year Plan is in its final stages of approval and that “the Accessibility for Ontarians with Disability Act requires each hospital to prepare an annual accessibility plan; to consult with persons with disabilities in the preparation of this plan; and to make the plan public”.

My hope is that the Accessibility Plan that the hospital develops will encompass all environmental disabilities including electromagnetically sensitive patients.

I would like to receive feedback from the Accessibility Committees, identifying goals for Environmental Sensitivities Accessibility, following this patient consultation process.😊

I would like to consult with your accessibility committee to make recommendations for EHS accommodations, including education (personnel/public).

**EHS Triggers and Symptoms**

**Medical Acronym EHS:** To avoid confusion between the terms Electromagnetic Hypersensitivity, Eosinophilia-Myalgia Syndrome (flu-like neurological condition linked to the ingestion of the dietary supplement L-tryptophan), Eisenmengers Syndrome (obstructive pulmonary vascular disease) and other medical acronyms associated with ES, I will refer to electromagnetic hypersensitivity as **EHS**, not EMS or ES.

Electromagnetic Hyper Sensitivity (EHS) is recognized as an environmental sensitivity and disability by the Canadian Human Rights Commission:

According to Women’s College Hospital an estimated 5% of the population experience mild, moderate or severe symptoms around RF wireless devices (in the microwave range). These people experience the cumulative effects of “microwave radiation sickness” at low levels.

**EHS Triggers:** EHS (electro-hypersensitivity) was first recognized in 1932 by the German medical doctor Erwin Schliephake. He published scientific data in the German Medical Weekly about his patients that were experiencing unusual symptoms around radio towers. He called this condition “microwave sickness” or “radio wave sickness”. (emfanalysis.com) The trillions of nerve cells in our body operate on electromagnetic impulses. Environmental doctors suggest that repeated long term exposure to RF energy can cause microwave radiation sickness in average people. The next few decades may tell us just how much the average population is affected by these signals.

Cell phones, WiFi access points, iPads, etc. all transmit and receive electromagnetic RF radiation in the microwave range. These devices can interfere with electromagnetic signals in the heart and brain. EHS is a physiological response to electromagnetic fields which interfere with the electrical signals and protein synthesis in our body. Our heart and brain generate the largest electromagnetic fields. EHS disabled people are often greatly affected in one or both of these areas and can experience other uncomfortable, but tolerable symptoms.

Microwave radiation from cell phone antennas is cumulative and can cause "microwave radiation sickness" in some environmentally sensitive people. These signals can cause heart arrhythmia, atrial fibrillation, or sharp, intolerable head pains that lead to severe migraines. **EHS patients also report** tinnitus, vertigo, skin burning, redness, rashes, tingling, fatigue (even after hours of sleep), cognitive decline (Brain fog), feeling that one’s brain has aged 30 years in a short period of time (a 35 year old unable to finish spelling the word “mouse” for their child around wireless signals). Epidemiological studies show RF signals can interfere with hormones (mental health, anxiety), increase glucose in the brain (ADHD). In the absence of these signals EHS disabled people begin to heal and within hours or a couple of days (depending on exposure), they feel completely well again.

The severity of EHS symptoms depend on signal type, signal strength, duration of exposure and proximity to the signal.

**Cell phones emit the strongest signals.** When someone sends a text within 40 ft (12 m) of me a sharp pain goes through my head. Additional texts hurt more and pressure builds (migraine). The signal goes through some walls (drywall, but not brick). My husband (Professional Engineer used an RF meter & it showed that a stronger burst of microwave radiation is sent with a text, than when a phone call is made). I have a teaching friend who lives with a heart sensitivity to WiFi. Although her EHS symptoms are different than mine, “grounding” outdoors and getting away from wireless signals, reduces our symptoms.

**Access points (Wireless hubs) also pose a problem for EHS patients, although the cumulative effects take a little longer because these signals are a little weaker. The latent effects can be debilitating.**

**Secondary Mental Response Due to Physiological Symptoms:** The pervasive nature of wireless signals and the widespread public use of wireless devices, make it almost impossible for EHS disabled people to avoid intolerable triggers in public places. Heart arrhythmia or sharp head pains can lead to increased agitation and an emotional “flight” response or increased anxiety as the individual feels the urgent need to leave the area, in order to reduce intolerable physical symptoms. The level of mental agitation, anxiety and need to “escape” experienced is directly related to the severity of their physical symptoms (based on the intensity of the WiFi
signals & proximity) and some anxiety will be based on anticipated pain (past experiences based on repeated patterns of symptoms). Their tone of voice can change instantly (when the cumulative effects reach a peak) and they may display unusual agitation, as their physical symptoms increase or become unbearable. If you were trapped in an elevator and someone was poking you with an electric prod, and each prod increased your pain, (or altered your heart signals) you would likely feel agitated. When WiFi signals are absent, EHS symptoms and level of anxiety will decrease. Patients with head sensitivities may experience intolerable/debilitating migraines a day following this exposure, if they are not able to find an EMF absent (treatment/wait) area.

EHS can be very isolating depending upon the severity of symptoms. Loss of spontaneity, unable to travel (WiFi on buses, planes, trains), loss of meaningful friendships as people avoid them so they can be connected to their devices, or a sense of profound loss because they are missing equal opportunities and events they. These patients may need compassionate support which addresses the mental aspect of this isolation.

I have waited outdoors until my name is called to be seen by a doctor, in extreme winter temperatures to avoid hospital signals which can be stressful, although it provides some relief from EHS symptoms.

**Accessibility in Sweden Hospitals:** As awareness about this disability becomes more public, there appears to be an increase in EHS accessible public places. There are eight hospitals in Sweden which provide “Friendly EMF absent Spaces” for EHS disabled patients.

http://www.eiwellspring.org/ehs/HospitalAccommodationsOfEHSPatientsInSweden.htm

Creating safe spaces at RVH will reduce electromagnetic triggers, creating unwanted physiological symptoms and help EHS patients feel they can seek medical attention without putting themselves at greater medical risk.

**Personal Diagnosis:** I was diagnosed with Electromagnetic Hypersensitivity (EHS), by Dr. Riina Bray (Medical Director, Environmental Health Clinic, Women’s College Hospital). I had a genetic test which determined that I carry a number of gene variants that prevent my body from being able to remove toxins effectively. I also have a history of toxic exposures which resulted in the accumulation of toxins in my body.

**EHS Physiological Symptoms:** [https://www.emfanalysis.com/ehs-symptoms/](https://www.emfanalysis.com/ehs-symptoms/)

**Video Dr. Erica Mallery Blythe – Diagnosis and Management of Electromagnetic Hypersensitivity**
https://www.youtube.com/watch?v=gQLrTEj1A8
https://www.youtube.com/watch?v=rL8wpJ3ZQc

**Biomarkers identifying EHS and MCS**

According to Dr. Riina Bray from Women’s College Hospital, there are a number of genetic polymorphisms. People living with gene variants feel the effects of electromagnetic fields. EHS is a somatic illness. Electromagnetic fields in the microwave range cause cerebral problems with blood flow, hypoxia (low oxygen), inflammatory, leaving patients feeling depleted. RF radiation causes oxidative stress (skin problems, pro inflammatory mediators are released), voltage gated calcium channels are opened up and the calcium released into cells can cause cardiac and nervous system disruptions. Fatigue results when our ability to detox is reduced.
Accessibility Recommendations for Patients with Environmental Sensitivities (Electromagnetic/Chemical):

Airplane Mode & Perfume Absent signage should be displayed at the Reception Desk or environmentally sensitive patients should be directed elsewhere to reduce their exposure to triggers.

1. Registration/Admission Question: Do you have chemical or electromagnetic sensitivities?
2. “Yes”: instruct patient to go to an EMF friendly space (not around cell phones in the waiting room, farthest away from access points in assessment rooms, smart meters, or other RF devices), or be given a shorter wait time if a room is not available to reduce their symptoms. Staff at all levels within 10 meters of an EHS patient need to be alerted, and asked to put phones in “airplane mode”.
3. Establish an RVH Environmentally Friendly Accessibility room, for EHS/MSC disabled (absent of cell phones, perfumes, toxic cleaning materials or air fresheners).

Post signs within 10-12 meters of this Environmentally Friendly Accessibility room to ensure patients and ALL staff are not using wireless devices.

Your Chapel room has low EMF levels and can be a temporary “friendly EHS aware space/accessibility room”. This room put some distance between EHS patients and devices near the fracture clinic. This room could be used temporarily until another room becomes available. Signs posted re: “WiFi Sensitivities; Please put your devices in airplane mode”, “Chemical Sensitivities, No perfumes/strong antiperspirants”. Thank you for considering the Environmental sensitivities of others.

Poster description: Within 40 ft (12 m) EHS disabled people can feel signals. Posters outside the EHS/MSC room showing triggers of EHS symptoms (cell phones/cell towers) and facial pain on a poster will be more compelling to encourage the appropriate accommodation. An “Environmental medical alert” sticker at the TOP of the patient’s chart will alert staff to the environmental triggers & clearly instruct hospital personnel to;

a) Put cell phone on “airplane mode”, turn off completely, or leave cell phone at the front desk (with hospital personnel) when meeting with other patients, within 10-12 meters of an environmentally sensitive EHS patient. This sticker should explicitly say DO NOT PUT CELL PHONE IN VIBRATE or SILENT MODE – IT EMITS SIGNALS. (This message is for doctors tempted to use “vibrate mode” for “emergency calls” coming in. They should leave their phone at the desk)

b) Hospital staff needs to make sure EHS patients are farthest away from wireless hubs/access points in hallways or in the emergency area. This accommodation can mean the difference between a few hours, days, or no recovery for the EHS patient.

4. Doctors/nurses & hospital staff should greet an EHS patient with “I understand you have an environmental sensitivity to (cell phones). I’ve put my phone in “airplane mode” or “left it at the front desk” and I have asked other patients in this area to do the same. This will reduce anxiety in the patient who will be concerned about potential exposure. It will also reduce the environmental trigger (microwave radiation signals).

5. All staff phones need to be in “airplane” mode DURING SURGERY. Although the patient is not aware of these signals, their body will continue to respond to them (microwave radiation sickness) and they’ll feel worse from the EHS exposure, than from the surgery itself.

6. An EHS/MCS accessibility plan should be reviewed annually to receive and evaluate feedback and meet new goals during these early stages of implementation.
Creating a name for the EHS/MCS Waiting Room that makes sense for your hospital. When choosing a phrase to designate a place for chemically & electromagnetically sensitive patients to go, please consider the friendliness of this phrase. These patients are often isolated; feeling shunned from most public places and need a “friendly” place to go that is welcoming and safe.

a) “Environmentally Friendly Accessibility Room” (For EHS/MCS patients)

b) “Friendly EMF/MCS Aware Space”

These phrases indicate hospital spaces that are welcoming and absent of environmental toxins for environmentally sensitive patients.

Reducing WiFi signals in some areas will not only make these areas accessible to EHS patients, but it will also reduce the cumulative effects of microwave radiation for children & pregnant women who as Health Canada states “are more susceptible to environmental agents (Health Canada’s cell phone recommendations to use ear buds, text, or reduce time on cell phones, to reduce RF exposure, 2019).

**No smoking in hospitals has benefitted everyone. Reducing microwave radiation signals from wireless devices, will make those areas accessible for EHS disabled patients and provide a healthier space for all patients.**

Please share with me, your timelines for EHS/MCS accessibility plans as identified in your Accessibility goals, how this information will be made public.

Thank you kindly for taking the time to review my request for making the hospital accessible to EHS/MCS patients.

Sincerely,

Shelley Wright

The hospital responded positively to my request, accommodated my medical needs thoroughly and as a result I didn’t have 7 hour migraines following my hospital visit.

**Thank You letter to Hospital Staff:**

See below a letter I wrote to thank Hospital staff for their efforts to protect me from environmental triggers. This letter shows the level of care I received, which significantly reduced environmental triggers.

Dear XXXX,

Thank you for mobilizing your effective team of patient representatives, Quality Risk management experts, managers and surgeon to assist me with my electromagnetic accommodation at RVH.

I was impressed with the level of insight and organization which created a safer environment for me in the Fracture Clinic.

5% of Canadians have environmental disabilities including electromagnetic hypersensitivity. Many of us who can’t detox microwave radiation signals from cell phones and wireless devices also have MCS and are chemically sensitive. Wireless signals can be debilitating for me.

Receiving the patient I.D. wristband at the Patient Rep. Office meant I wasn’t bombarded with cell phones at the registration desk. Being escorted through the lower floor hallways enabled me to avoid the disabling RF signals in the busy main elevators. Cell phone signals bounce around and are too close for comfort in these
metal enclosures. The manager of Reception introduced me to the Fracture Clinic manager who announced that a fact sheet had been handed out to Fracture clinic patients who were encouraged to put all wireless devices, including cell phones in “Airplane mode”. The Airplane mode poster also reinforced this request. I was told that my surgeon would announce if he left his phone at reception/turned it off completely before he met me in the EMF protected area.

Everyone worked seamlessly together to accommodate my disability for which I am truly grateful. The multiple spiral fracture in my leg from my ski accident never came close to the level of intolerable head pain I experience from RF exposures in the microwave range. I get microwave radiation sickness very quickly.

Thank you kindly for all your support.

Sincerely,
Shelley Wright

Additional FYI: There are a few Ontario children who are heart sensitive to WiFi and three have died. The most compelling story is the story of a little girl in Collingwood who survived. She was 6 weeks away from heart surgery, when her parents discovered that her heart monitor indicated her heart was fine when she wasn’t around WiFi signals. She didn’t have heart surgery, but she now avoids WiFi signals. Two heart sensitive students in Simcoe weren’t so lucky. I have an EHS, heart sensitive teaching friend who is concerned for her life.

There is a seven year old from Quebec who died. Her parents had expressed concern about their Smart meter on the outside of her bedroom wall, because she was showing unusual heart sensitive symptoms, but they didn’t connect the dots soon enough. Emergency personnel wrapped her in an electric blanket and took her to a hospital (more WiFi). She complained that her heart was feeling worse, but no-one seemed to understand what she needed. She died in the hospital.

The following article illustrates the impact this physiological disability can have on the mental health of people who don’t have the appropriate safeguards in place for physical accessibility and mental support.


Young people need to know local hospitals aren’t hostile environments that create intolerable physiological EHS symptoms. They need to trust that hospitals are places they can go to get appropriate medical attention.

Posting sensitive “Airplane mode” & “Perfume sensitivity” signs in health care facilities will help to create inclusive environments for environmentally disabled patients, reduce stress for those who are environmentally, as well as educate and encourage other patients to respect the rights of disabled patients accessing health care.