Personal Statement for HHS RFI HHS-OASH-2026-0397

Answers to Questions 2 and 3

My Perspective

I am a resident of Sweden. I trained as a nurse with a specialization in anesthesia and later worked in healthcare education and development. I describe my own experience with electromagnetic hypersensitivity (EHS) and how RF/EMF exposure affects my health.

My Experience

When it started. Between approximately 2012 and 2014, I had a persistent cough. I consulted with healthcare professionals and underwent tests, but no clear explanation for the cough was found. In April 2014, a nearby cell phone received a text message. I felt a sudden, strong sensation in my head and noticed tinnitus and hearing loss in my right ear. After that, I began to recognize a recurring pattern of reactions in different environments.

Sources and Symptoms. I have noticed reactions around cordless (DECT) phones, Wi-Fi, mobile phones in use nearby and sometimes a microwave. I also react when we drive past mobile phone masts; this happens repeatedly in the same places along the road. My symptoms have included tinnitus, coughing, dizziness, weakness in the legs, blurred vision, nausea, vomiting, incontinence, unusual fatigue and problems with memory and word comprehension. Some reactions start within seconds; after stronger episodes the symptoms can persist for days. The restrictions on where I can go and who I can see have also caused considerable isolation.

What changed when we reduced our exposure. We removed our DECT phone, turned off the Wi-Fi at home and changed the way I use phones. We also started using a consumer EMF meter to get a rough idea of RF levels in different environments. I have noticed more severe reactions in some places where the meter showed higher readings. I feel fine at home, where our meter has shown about 0.005 mW/m^2. I also feel very well in our vacation home, as I did before my symptoms started. When I am away from the exposure I associate with my symptoms, I am completely symptom-free.

An example from healthcare. During a hospital stay in 2025, I noticed a marked difference between two wards. On the first, our meter showed low readings. After I was moved to an older ward, it showed higher readings, people nearby were using cell phones, and I felt an immediate reaction. I was also being treated for another medical problem during that stay, which makes that particular experience more difficult to interpret. It did, however, reinforce how important the environment of a healthcare facility can be for someone with my symptoms.

Other factors I have considered. I have also experienced sensitivity to metals and printing ink. Sometimes it is difficult for me to determine whether metal sensitivity causes or contributes to a particular reaction. Several years after the dental amalgam was removed, I felt somewhat less sensitive. I rushed the removal process and regretted it later.

I have never had any form of hypochondria. My medical background has helped me observe and describe what is happening to me. After 14 years of the same recurring pattern, I know that I have EHS and have no doubt that RF/EMF exposure is causing my symptoms. Knowing this, I have largely avoided places and situations where I would expect higher exposure. I hope that the HHS will investigate experiences like mine, including symptom patterns, measured exposure over time, and the possibility of making healthcare settings accessible to people who report these reactions.

I wish with all my heart that this important knowledge be shared with all healthcare facilities worldwide

Warm regards,

Ingrid Berggren (Now, retired nurse)

Jönköping

Sweden

berggren556@gmail.com