

RE: Medical Condition known as Electrohypersensitivity (EHS)

[April 2023]

To Whom it May Concern,

I am a research scientist and for the past 28 years I have been studying the biological and health effects of electromagnetic pollution and working with people who have developed electrohypersensitivity (EHS). My research involves determining how to diagnose people with EHS and how to help them recover. As Professor Emerita I give lectures for Continuing Medical Education credit to those in the medical community regarding the health effects of electromagnetic pollution, as it is not something that is taught in medical schools.

I will keep this letter short.

EHS is real and is a debilitating condition according to the World Health Organization (WHO). They prefer to call it *idiopathic environmental intolerance attributed to electromagnetic fields*. It is “idiopathic” because there are multiple **causes** of EHS that is **triggered** by exposure to electrosmog (electromagnetic pollution). In other words, the symptoms appear when a person is exposed to electromagnetic radiation, although electrosmog may or may not have caused their sensitivity. People with damage to their nervous system (concussion), with exposure to toxic metals especially mercury (fillings for example), with exposure to mold, with infections like Lyme and those with an impaired immune system are more likely to develop EHS.

Most physicians are unaware of these multiple causes and hence have difficulty treating those with EHS since someone who has a compromised nervous system due to toxic metals vs. physical injury requires different types of treatment. Electrosmog triggers their reaction and seems to exacerbate it since their symptoms become worse the longer they are exposed and the higher their electrosmog exposure. Unfortunately, many have misinterpreted the WHO statement to mean that people who have EHS symptoms may be reacting to something other than exposure to electrosmog. This is an incorrect interpretation of WHO’s statement on EHS, hence their inclusion of the term ... “attributed to electromagnetic fields.”

EHS is a phenomenon that is increasing in our society and there are literally thousands of scientific studies documenting the adverse biological effects on humans. This is NOT a psychological illness as some would like you to believe. Plants and animals are also affected by this pollution. I refer you to a peer-reviewed publication I wrote in 2019 entitled, *Electrohypersensitivity (EHS) is an Environmentally-Induced Disability that Requires Immediate Attention*. This provides many of the references you may find useful to better understand this illness. <http://www.e-discoverypublication.com/wp-content/uploads/2019/03/JSD18020-final.pdf>

A growing number of people are no longer able to tolerate the increasing levels of electrosmog. Their symptoms include but are not limited to difficulty sleeping, chronic fatigue, headaches and chronic pain that includes muscles and joints, heart palpitations resulting in feelings of anxiety, dizziness, nausea, skin disorders, increased night-time urination among adults and bed wetting among children, nose bleeds among others.

With increasing and prolonged exposure, the symptoms become worse. Reducing exposure as much as possible enables many of those suffering with EHS to recover. Living a healthy lifestyle that includes healthy eating, exercise, fresh air, being outdoors in nature and minimize stressful situations all contribute to recovery. However, eliminating electrosmog in the home and work environment is essential for recovery. These people cannot recover if they are exposed to smart meters or digital meters as they both generate radio frequency radiation and dirty electricity (high frequency voltage transients) on indoor wiring. People are adversely affected by levels that are less than 1% of Health Canada's Safety Code 6 Guidelines as these guidelines protect against an acute heating effect only.

EHS is recognized as a *disability* by the American Disability Act in the U.S. and as a *functional impairment* in Sweden. It is recognized by the Canadian Human Rights Commission; by the Parliamentary Assembly Council of Europe (PACE); and by the World Health Organization that states that this is a *real and debilitating problem* that occurs at *levels well below international guidelines*. There is also an International Classification of Disease code for RFR damage and electrical sensitivity.

We make accommodations for people with disabilities and for those who have environmental allergies or multiple chemical sensitivity (MCS). Indeed, hospitals and medical clinics ask patients not to wear fragrances to protect those who suffer from MCS. Schools are now peanut-free environments to protect those who have life threatening peanut allergies. Smoking is banned in most indoor environments because it is a carcinogen. EHS is an emerging health issue that cannot be ignored. It is essential for those in positions of authority to educate themselves about EHS and to accommodate those with this disability.

It is critical for people with EHS to be able to live in their own homes without the intrusion of electromagnetic pollution from nearby cell phone antennas or from utility meters that monitor electricity, water and/or gas. It is unethical to dismiss these complaints especially once someone has been identified as EHS by medical professionals.

If you would like to discuss this matter, please feel free to contact me. I would be pleased to address any questions you may have related to this issue.

Sincerely,



Magda Havas,
BSc, PhD, Professor Emerita