

Multiple Chemical Sensitivity

MCS: a 1999 consensus² stated that "Multiple Chemical Sensitivity is:

1. a chronic condition
2. with symptoms that occur reproducibly
3. in response to low levels of exposure
4. to multiple unrelated chemicals that
5. improve or resolve when incitants are removed, &
6. symptoms occur in multiple organ systems."

For the most effective management of MCS, "The three most highly rated treatments were:³

- chemically safe housing,
- avoiding incitants, and
- prayer" (including meditation).

World Health Organisation (INTERNATIONAL) ICD10

S00-T98 Injury, poisoning and certain other consequences of external causes

T66-T78 Other and unspecified effects of external causes

T78.4 Allergy, unspecified; Hypersensitivity NOS ⁴

Diagnosis: Multiple Chemical Sensitivity syndrome [MCS] (GERMANY) ICD10-Code: T78.4

The ICD10 is an international classification of diagnoses.

ICD10SGBV is used in Germany as key to the indication of diagnoses, particularly for the account with the health insurance companies. The ICD10 code for the diagnosis "multiple Chemical Sensitivity syndrome [MCS]" reads "T78.4".⁵

Causes

MCS has many 'generic names' but the most suitable is Toxicant-induced Loss of Tolerance (TILT).⁶ This implies specific aetiology by way of one-off or occasional high-level, or persistent low-level toxic exposures.

Many medical journal articles state that chemical exposure to have induced MCS. About 50% of patients associate the cause of their MCS too exposures of one or more of the following chemical types⁷: solvents, petrochemicals, pesticides, herbicides, carpet, glues, rubber, industrial emissions, pollution, carbonless copy paper, colognes, fragrances, scented air fresheners, moulds, preservatives, plastics, new furnishings, silicon breast implants, medications, anaesthetics, hair spray, nail polishes, cleaning products, food additives, heavy metals, and more.

Symptoms

MCS symptoms vary greatly for each patient regarding frequency, intensity inhalation or dermal exposure. The cause of the patients condition tends to predetermine subsequent exposures that can lead too various combinations of the following symptoms depending on the exposure to the incitant:^{3,6,7,9,12,14}

Digestive Tract: Nausea. Vomiting. Diarrhoea. Constipation. Bloating. Belching. Gas. Heartburn. Intestinal aches/pains.

Ears: Itchy. Aches. Infections. Drainage.

Emotions: Mood swings. Anxiety. Fear. Nervousness. Anger. Irritability. Aggressiveness. Depression.

Energy/Activity: Fatigue (chronic). Sluggishness. Feeling of weakness. Hyperactive. Restlessness.

Eyes: Watery. Itchy. Stinging. Aching. Swollen. Reddened. Sticky eyelids. Bags or dark circles under eyes. Variable blurred vision. Tunnel vision.

Head: Headaches. Faintness. Dizziness. Insomnia.

Heart: Irregular, Skipped, Rapid, Pounding, Slow beat. Chest pain. High/Low blood pressure.

Lung: Congestion. Asthma. Bronchitis. Shortness of breath. Difficulty breathing.

Mind: Poor memory, comprehension, concentration or physical coordination. Confusion. Difficult decision-making. Stutter. Stammer. Slurred speech. Learning impairments.

Mouth: Swollen or discoloured tongue, gums or lips. White, clear or blood blisters. Canker sores.

Muscle & Joint: Arthritic pain in joint/s. Stiffness. Fibromyalgia. Muscle pain. Aches. Muscular exercise intolerance.

Nose: Stuffy. Sinus problems. Hay fever. Sneezing attacks. Excessive mucus.

Skin: Acne. Hives. Itches. Rash. Prickly. Bruising easily. Dry peeling or flaking (not burnt). Hair loss. Flushing. Hot flashes. Excessive sweating.

Upper Airways: Chronic cough. Gagging. Clearing throat regularly. Easily irritable airways. Sore throat. Hoarseness. Voice loss.

Urinary/Genital: Itching or discharge. Frequent urination. Frequent 'Urinary Tract Infections'. Aching testis/ovaries.

Weight: Under weight. Excessive weight. Water retention. Compulsive eating/drinking. Cravings for either food or beverage including water.

Miscellaneous: Inflamed lymph glands. Frequent unknown illness or infection.

Prevalence

United States:

- **2%**, New Mexico⁸
- **3.9%**, North Carolina^{9,10}
- **6.3%**, California¹¹
- **2.5-3%**, Iowa (Military; non-deployed)¹²

The difference between "chemical sensitivity" & "Multiple Chemical Sensitivity"^{9,10,11,12}

- **4%** of citizens estimated as disabled by Multiple Chemical Sensitivity.
- **16%** of citizens report an "unusual sensitivity" to common every day chemicals.

Australia:

New South Wales¹³

- "**2.9%** diagnosed with Chemical Sensitivity".
- "**24.6%**" reported "sensitivity to chemical odours".
12.6% higher than US average statistics.

South Australia¹⁴

- "**0.9%....** medically diagnosed with MCS "
- "**16.4%** experiencing chemical sensitivity"

Mortality

It is frequently documented in medical journals that humans, animals & insects die at their respective "lethal dose" (LD) due too toxic substance exposure. It is known that long-term low-level exposures can result in various cancers or organ failure from chemicals such as Benzene, Formaldehyde or pesticide. The long-term health effects of most chemicals & compounds are not tested adequately. Presuming that chemicals kill at lethal dose but not injure at a lower dose is illogical. Multiple Chemical Sensitivity is one of the mid-ground adverse disease states that can be induced by chemical poisoning.

Supportive Medical Physicians

Environmental Medicine Physicians most commonly deal with MCS patients on a regular basis. Clinical Ecologist & Occupational Medicine Physicians are known to be helpful for diagnostic purposes. Immunologist can be supportive of MCS but not all believe the aetiology of MCS can be from chemical poisoning. Nevertheless, they can be very helpful & supportive.

Physicians Referral

- **American Association of Environment Medicine**
www.aaem.com/Referable_Physicians.html
- **Australasian College of Nutritional & Environment Medicine**
www.acnem.org

Doctors Websites

- **Dr Martin Pall**
<http://molecular.biosciences.wsu.edu/Faculty/pall.html>
- **Albert Donnay**
www.mcsrr.org
- **Dr Grace Ziem**
www.chemicalinjury.net
- **Dr Gunner Heuser PhD**
www.toxgun.com
- **Dr Doris Rapp**
www.drrapp.com
- **Dr Mark Donohoe**
<http://homepage.mac.com/doctormark/Menu7.html>

MCS Support

- **MCS Global**
www.mcs-global.org
- **Chemical Injury Information Network**
www.ciin.org

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Disclaimer: This information is not to be interpreted as medical advice. Should you have health problems, consult a knowledgeable health care physician. Physician or organisations listed do not necessarily endorse the contents of this brochure. This brochure does not necessarily endorse the physicians or organisations listed.

For more detailed references see:
www.geocities.com/jonno6766

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Multiple Chemical Sensitivity syndrome

a
chronic
complex
multi-organ
disease

Conclusion: MCS patients do not have either somatic or psychologic symptoms under chemical-free conditions, and symptoms may be provoked only when exposed to chemicals."