

Dear Gillian,

I have read with considerable concern about your circumstances through the pages of MCS International. I thought my problems were bad enough but they pale into insignificance when faced with yours.

I now hear that to add to your worries you face eviction from your far from suitable present accommodation to something maybe more acceptable to others but even less suitable for yourself.

At Gordon's instigation I have sent the following e-mail, suitably edited, to most of the addresses he published. I hope this might help

Best Wishes for the future

John

Dear Sir

I have suffered for many years from Multiple Chemical Sensitivity (MCS) which resulted in my early retirement from my job as a hospital pharmacist 10 years ago. As you may know this condition is caused by an acute sensitivity to several different chemical groups and is often caused by long term low level exposure or a single high exposure to one or more of these chemicals, often in the workplace but sometimes in the home or the environment in general. The symptoms are varied but include asthma, fatigue and muscle weakness which continues during continued exposure and for several days or even weeks afterwards. The number of chemical triggers to which the person is sensitive increases with time and includes substances related chemically to the trigger or associated with its use. The final outcome is that the affected person is unable to work and engage in normal social interactions with other people.

In my case the main triggers are phenolic biocides, quarternary ammonium biocides and surfactants and artificial fragrances. Since one of more of these are to be found in all public places or released from the clothing hair or skin of most people I have had to withdraw myself completely from human society. However I consider myself fortunate in that I was already living in a house in a rural environment some way from other dwellings, I have an adequate income with a pension and savings from my former employment and a part time job which I can do using the telephone and internet exclusively. I am also doubly fortunate in having a wife who believes in my condition and is my contact with the outside world for shopping and other essential requirements.

Many other sufferers from this debilitating condition are not so fortunate. The symptoms and causes of MCS are not widely recognised or understood by the medical profession and indeed some do not believe the syndrome exists.

Under these circumstances the sufferer has no choice but to continue working and living in an environment which inevitably makes their condition worse and often finally find themselves unable to work and also unable to get any kind of financial or practical support for their disability, for that is what it becomes. They end up in a state of penury with no means of support or suitable accommodation free of the chemicals which afflict them and often have to rely on the charity of others for their very existence.

Such a person is Gillian McCarthy who I first heard of through my association with MCS International. I won't go into the details of her condition as they are laid out on their web pages <http://www.mcs-international.org/news.html> and http://www.mcs-international.org/meet_team_gillian.html Suffice it say that this lady, whose condition is far worse than mine, has been living for the last ten years in what amounts to nothing much more substantial than a wooden shack in the field of an organic farm, this being the only way she can avoid contact with the many substances which afflict her. You can well understand that this far from adequate accommodation with no water, heating or full weatherproofing does nothing to improve her health which was already very frail from her contact with these chemicals and other triggers.

I understand that her condition and suffering have been recognised by both the local council and the health authorities and several time over these ten years she has been offered help, including the provision of suitable chemical free accommodation. None of these offers have ever come to fruition and I get the impression this is often because of delays and procrastination of which she is not the cause. Expecting even a healthy person to live in these conditions is inhumane. I realise that fulfilling her needs is not an easy task and may not be easy to meet but, as I said above, she is not in the fortunate position of being able to provide these for herself like I am.

Now I hear that she is about to be evicted and moved to accommodation which from its description would not be suitable for me and certainly not for her. She appears to have no choice in this and it is likely that her health will deteriorate even more if this should come to pass. I can imagine the stress this would cause me as a fellow sufferer and in her case after 10 years of living in these dreadful conditions being moved to something which may appear to others much better but which in practice could be much worse is beyond my imagination.

I beg you to use what power and influence you have to not only prevent this from happening but also provide her with the much more suitable living environment and help which she surely needs and has indeed been promised many times in the past.

John Lea

UK Shropshire Regional Rep for MCS-International.Org

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