Fragrance-Free Workplaces
Wave of the Future?

Can’t You Dance the Polka

Alison Freeman singing:

As I walked down that Broadway, one evening in July.
I met a maid who asked my trade and a sailor John says I.
And away you Santy, my dear Annie.
Oh you New York Gals, can't you dance the polka?
Well, to Tiffany's I took her I didn't mind expense.
I bought her two gold earrings and it cost me 15 cents.
And away you Santy, my dear Annie.
Oh you New York Gals, can't you dance the polka?

(speaking) That’s one of my favorite songs—"Can’t You Dance the Polka?”

Alison Freeman: I have become so sensitive to fragrances that my reactions such as headaches, dizziness, respiratory infections are now having a major impact on my professional career as a performer and voice teacher. My extreme fragrance sensitivity has left me no choice but to turn down opportunities to perform at festivals or to open for big name acts.

Alison Johnson: A few years ago a taxicab driver from Las Vegas emailed me to say: “I was making good money driving a taxi, but I had to resign because the
other driver would spray it with air freshener. Eventually I got so sick I had to quit.” This taxicab driver is just one of millions of Americans who are desperately trying to hold on to jobs that are damaging their health and making them sicker with each day that passes.

**Narrator:** Alison Johnson developed multiple chemical sensitivity in 1973, and through her own experience and the experiences of her chemically sensitive daughters she has gained a wide knowledge of the field. Visitors to her website, www.alisonjohnsonmcs.com, can read excerpts from her three books and play several of her videos. In 2001, she founded the Chemical Sensitivity Foundation, which she chairs.

**Jeff May:** So I investigate buildings where people are feeling sick because of the air quality. And I had a test kit in my vehicle for carbon monoxide, and the color changed, indicating that I was being exposed to carbon monoxide. And then I also discovered that I had a muffler leak, well, gasoline leak, and I was breathing gasoline fumes and combustion gases.

And I became very chemically sensitive, I couldn’t go into hardware stores because of the pesticides. I couldn’t put gasoline into my car. So it was very, very difficult for me to function. And eventually I got rid of the vehicle, so my symptoms improved tremendously. But I still to this day can’t be exposed to pesticides; I get brain fog, I can’t think straight.

But there was one sort of interesting incident that happened to me. I was on a plane with my wife going to Italy at 30,000 feet, and I had to use the bathroom and they had a very strong fragrance-emitter in the bathroom. And I sort of had trouble
breathing, so I put a paper towel over my face because the paper towel absorbs the fragrance and it doesn’t last very long, so after a while I was having trouble breathing and I was holding my breath. So when I stepped out of the bathroom, I got very dizzy and I fainted and one of the stewardesses actually caught me and then they gave me oxygen and I was fine after that. But it’s just, it was really, the fragrance really bothered me in the bathroom.

**Alison Freeman:** Sings “Maid of Amsterdam”

In Amsterdam there lived a Maid
Mark well what I do say
In Amsterdam there lived a maid
And she was mistress of her trade

I'll go no more a-rovin' with you fair maid
A-rovin', a-rovin', since rovin's been my ru-i-in
I'll go no more a-rovin' with you fair maid

(Speaking) When I sing "Maid of Amsterdam," I’m reminded of all the roving I used to do. Sensitivity to fragrance has greatly curtailed my roving in recent years. In 2009, I was so excited to return to the Balkans for a concert tour, but by the time we landed in Belgrade, I was miserable because of exposure to fragrance while traveling. Now I’m careful to avoid prolonged exposure in situations where I would likely encounter fragrance.
Chip: I’m a high school history teacher from Washington State, and I became very ill working in my classroom. Mold was discovered in my classroom, and I became very sensitive to mold and later developed multiple chemical sensitivity.

I became sensitive to some of the products we were using in the classroom, magic markers, white-board markers, the shampoos they were using to clean the carpet, and some of the cleaners that they were using. I initially discovered this by losing my voice. I became very hoarse, and as a coach and as a teacher, you can understand how that became very difficult to do my job. Ironically, I was an All-American wrestler in college, and everybody was very surprised when I became very ill and had many different symptoms—headaches, I gained a considerable amount of weight, I had a lot of fatigue and basically was very lethargic, didn’t have a lot of energy as a result of these acquired sensitivities.

My workplace environment did improve a little bit once the school decided to move me into another classroom that was not infected with mold. It was very challenging and very difficult to do my job. The students I had to ask not to wear perfume, which was awkward for some of these younger kids that really didn’t have an understanding or a sensitivity to the possibility that people react to various chemicals.

Linda Austin I started with a chronic cough in 1991, and at that time we were going through a house renovation. The cough became progressively worse and eventually I was hospitalized in 1994 with a life-threatening pneumonia. I was intubated for three weeks; I was in the hospital for four weeks. But even once I came out of the hospital I continued to have this chronic cough. I saw multiple doctors, multiple tests, and no one could exactly tell me why.
But to this day I still have a cough and what triggers the cough now I think because my respiratory is sensitive, are things like fragrances, and that can be difficult, particularly if you are in an elevator and someone gets on and they can have a lovely perfume on or hair spray or whatever, and I start coughing. And it can be embarrassing, it can be very embarrassing. The worst situation is if you are in a meeting and you’re with friends you like, you know, and you want to turn and you want to say, “Oh, that’s lovely. That fragrance you have is lovely, but I need to tell you I’m going to start a cough spasm because I can’t tolerate it.” So it affects me every day.

**Chris Markham:** My name is Chris Markham; I’m a retired photographer. This is my wife Maureen, and she’s a retired nurse. And I developed a breathing problem they call MCS, probably back in about 2013, about mid-2013. It started after our house was destroyed in the Sandy storm; a tree took it out. We’ve lived different places; we rented this home here. In the meantime I went back to the house, which was quite damaged, and I crawled through all the spaces in the house and the lumber to salvage whatever I could. And I did that for two months, every day. And I didn’t have a problem in there at the time, but we’re thinking now that might have been the thing that triggered it off because I never had a breathing problem.

And then fabric softeners began to bother me, and our detergent also. Didn’t really realize what it was, but began to smell it. Every now and then I’d get a coughing fit and then it was over with. So eventually we said, couldn’t we just get rid of this stuff here, so we did, we just dumped it out and got the free stuff. But still I began coughing and choking more, and it just increased gradually.
Jeff May: So one of the big problems we have is that the weather is changing really worldwide, and there seem to be an increase in the number of sort of really devastating hurricanes and severe flooding. In fact, some areas have really been hit more than once. It’s relatively unusual, or it may be the new usual, I don’t know. But once a house is flooded like that, you know, if it can be dried out very, very quickly, it may not necessarily be a problem, but what’s happening in most of these cases is that there’s no power and these houses are staying wet for many, many days and they have these very extensive mold problems. And people are exposed to the mold, and they’re also exposed to the chemicals that the mold releases and unless they’re very, very careful they actually may become sensitized to the mold and even really to the chemicals, so in fact we may start to see more people becoming chemically sensitive as the result of exposures to the very severe conditions that are in their houses after the flooding.

So if people become more chemically sensitive, then that means that they are going to be more sensitive to fragrances as well because fragrances are just chemicals whether they are natural, you know, organic, whatever they are, they are basically just chemicals. And people can react to them the same way they would to any kind of chemical.

Chris: Then I guess it was in 2014, my wife was working then at the hospital as a nurse, and she’d come home from work, and we would be fine, go about our business. I would have little attacks here and there. Some days I actually had no attacks at all, in 2013, and part of 2014. But we don’t know why.
Well, one day she walked in the house, on a Tuesday afternoon, came home, and I began choking and coughing, and smelled everything she had on her. It was apparently an air freshener, but I didn’t know what it was. I said, “My gosh, what’s on your clothes, take them off.” So she said, “There’s nothing on my clothes.” And I said, “Where did you have your coat? It’s choking me.” And so she put her coat down in the cellar and changed her clothes and put them on the back porch, but it was still in her hair. And she washed her hair, and I was better after that, more or less. And then this happened every single day for eight or nine months. It was a routine now. When she came home from work from the hospital, she would have to change. She would always wash her hair, every other day, whatever. Sometimes I was OK with it eating dinner. Other times I wasn’t, and she would eat in the dining room, and I’d have to sit at the kitchen table to eat, otherwise I would begin choking and bring up a lot of phlegm, and trying to eat something, forget that. So I’d just go in the bathroom and take care of myself until it was over—sometimes an hour, sometimes an hour and a half.

**Narrator:** Fabric softener and perfume in the ambient air clings to clothing and upholstered furniture in much the same way cigarette smoke does. That creates a major problem for people who react to fragrances.

**Chris:** We used to love to walk.

**Maureen:** We can’t walk now because whenever we go out walking, there is so much fragrance from the fabric softeners in the air. We can’t even go for a walk now.
Alison Freeman: One of the things I miss the most is my daily walk. My whole life I’ve walked everywhere. I walked to school, walked a paper route, walked for exercise, but now I have to get in the car and drive to a park or the ocean if I want to go for a walk because as soon as I step out my front door into my yard I smell fragrance from my neighbors’ dryer vents. We bought our current home in 2007 because it was in town near my husband's job. We spent a lot of time out in our one-acre yard planting apple trees, blueberries, and grapes. But by 2013 I was noticing the occasional intrusive odor of dryer-vent fragrance when I was outside in my yard. Now that a few more houses have been built nearby the problem is overwhelming.

One of my favorite songs about the sea, which is called “Shipmates,” is about two sailors who are setting sail for different parts of the world but who hope to someday meet again in some distant port. This song is based on a poem by C. Fox Smith that was adapted for singing by Charlie Ipcar.

Shipmates

Good-bye and fare you well
May naught but good attend ye
All around the wide world
Where sailors’ luck may send ye
Up and down the deep seas,
Back across the line
And you’ll go your way,
And I’ll go mine.
And you’ll go your way,
And I’ll go mine.

Good-bye and fare you well
For we’ll sail no more together,
Up and down the deep seas,
In fair or foul weather
We’ll sail no more together
In foul weather or fine
And you’ll go your way,
And I’ll go mine.

**Chris Markam:** I used to run. I used to do stuff all day long, work all day, ran, exercised. I’m 74 now. When I was 70, I was doing pull-ups, push-ups, a machine. Nothing could stop me.

**Maureen Markam:** Some nights he’s been so bad I wanted to call the EMR, but he doesn’t want me to call the EMR and bring him to the hospital because the hospital has the fragrances and he’s afraid he’s going to get worse, so he won’t go to the emergency room.

**Narrator:** Chris took a video of himself having an attack the night after we had filmed him.

**Chris Markam:** I guess the medicine is wearing off now . . . you guys were here. [Repeated bad coughing, choking] , , , , . . . I was having an . . . running down mostly the left side here, getting caught down in here. [Repeated bad coughing, choking] It gets hung up here. [Repeated bad coughing, choking]
Chris Markam: You should tell them about the fragrances that were on her clothes and where they were coming from when she came home from the hospital. You should know how this came about. Do you want to tell them about that? The stuff they put in your office?

Maureen Markam: Oh, you mean when I was working?

Chris Markam: Yeah, when you were still working.

Maureen Markam: Oh, it’s a mechanical; it runs on battery. And it’s high up on the wall, so people didn’t realize it was there at first, so it would keep shooting off perfume. When I realized what it was doing, it was running by a battery, so I took the battery out, and everybody was thankful that they didn’t have to smell it anymore.

Narrator: Air filled with air freshener is not fresh air. There are still many places in America where one can find fresh air, and here is one of them.

Alison Johnson: This is wonderful fresh air here. This is probably some of the best air in the world. This is Reid State Park. It’s a wonderful place where I come every chance I get, maybe once a week, with a book or a picnic lunch. I actually wrote several of my books sitting right here on these rocks, looking out at this beautiful ocean.

Narrator: Senator Bernie Sanders sent Alison Johnson the following letter of endorsement for her first documentary about multiple chemical sensitivity:

On the screen there appears a copy of the letter from Bernie Sanders.
Narrator: Dr. Christine Oliver is an Associate Professor at Harvard Medical School and served for many years as Co-Director of Occupational and Environmental Medicine at Massachusetts General Hospital.

Christine Oliver, MD: Multiple chemical sensitivity, or MCS, is a multisystem disease that is characterized by symptoms associated with exposure to low levels of chemical vapors. These levels of exposure are commonly found in the ambient environment. Systems that are affected by MCS include the respiratory system, the neurologic system, the gastro-intestinal system, the skin in some cases.

For those with less severe illness and disease, symptoms may include cough, shortness of breath, headache in association with the exposure to chemicals on an elevator, or when they open a magazine and have a scented insert in the magazine. For those more severely affected, however, symptoms can be truly disabling. They interfere with a person’s ability to engage in gainful employment. They interfere with a person’s ability to use public transportation. They interfere with a person’s ability to live in a multifamily housing unit. They interfere with family life.

Alison Johnson: People who develop multiple chemical sensitivity, or MCS, begin to react to chemicals that they encounter in everyday life in substances such as paint, perfume, pesticide, cleaning products, detergents, fabric softeners, gasoline, diesel exhaust, cigarette smoke, new carpets, building materials, and air fresheners.

Jeff May: Well, I had one really good example of how people can get sick by being exposed to chemicals in their air. I was investigating a house where an older
couple were quite ill from very serious chemicals that were being emitted by their heating system. And I walked into that house, and I kind of forgot why I was there. I mean the chemical smell was so strong and overpowering that I couldn’t think straight, so I had to go back and put on a charcoal respirator. So I’m very sympathetic to the fact that people can think better in cleaner air.

**Tara Batista:** I’m Tara Batista. I’m a registered nurse at the VA hospital in Bedford, Massachusetts. I joined the army when I was 18, and at age 19 I was sent to the Gulf War in 1990–91. I had exposure to CARC paint, nerve agent, petroleum products, chlorine gas, oil well fires, all sorts of chemicals, and developed chemical sensitivity, migraines, and all sorts of symptoms since then.

So after the army, I became an RN. It was extremely difficult with being chemically sensitive and allergic to every scented product like perfume, scented hair products, etc. And it’s surprising that I had such a rough time just in school and then in every job I had because in nursing school they teach you not to wear scented products because it causes vasospasm, bronchospasm, and allergic reactions in patients as well as staff.

**Narrator:** Under the Americans with Disabilities Act, covered employers are required to provide “reasonable accommodations” to qualified job applicants and employees with disabilities.

**Tara Batista:** In 2008 I started working as a registered nurse at the VA hospital in Bedford, Massachusetts. It was a struggle in the beginning because I was exposed, with chemical sensitivity, exposed to scented products. My boss at the time saw me struggling and saw I was a good nurse, so she had a PhD person come and do an
educational training about multiple chemical sensitivity, explaining the rationale to the staff why they needed to refrain from wearing scented products because I’m sensitive and get very sick. I had to work sick routinely because I didn’t have the accommodation in place yet. It took time for the board to decide.

It was such a struggle. I ended up asking to go to evenings when a position opened because I knew the staff on evenings, there was only one person who wore perfume and I thought maybe I could appeal to his kindness. So out of desperation I requested going on evenings. And then a new manager came who enforced the accommodation. All I had to do if I had a reaction to something or somebody is email her and she would have a private conversation and that would help.

One of my biggest problems was so many days I would develop a migraine from the staff’s perfume, and I had to continue working. I couldn’t afford to leave, and I just remember how difficult it was, and I really think the training as an army medic is what got me through it because you have to keep going. They trained me very well, and I care about the patients and I didn’t feel it was correct to leave despite pain and suffering, so I soldiered through.

*At this point there appears on the screen footage of a gazebo and other parts of Tara’s garden.*

It’s late in the season, but this used to be covered with morning glory vines. They’re purple; they’re all seeding now, but we’ve had a frost. So I spend all my days out here recuperating in the garden. I find it very grounding and nurturing. When you’re sick a lot, you need something to rejuvenate yourself.

I’ll show you the river. So all of these rocks I moved in in buckets from up the street. They’re all covered with leaves. So I redid the river basically, and this area,
all the way back there I made a path with rocks. I sit out here with a cup of tea or coffee and relax, and it’s beautiful. You hear the flicker overhead. Lots of birds, and animals.

**Narrator:** Dr, Lea Steele, an epidemiologist, published a study in the *American Journal of Epidemiology* in November of 2000 which documented that over 200,000 people who served in the first Gulf War are now chronically ill. That’s over one-third of those who served.

**Dr. Ronald Blanck:** In the mid-1990s, I commanded Walter Reed Army Medical Center. I continued to work on looking for causes for the illnesses suffered by many Gulf War veterans, illnesses that were clearly more than stress related. I looked at vaccines, I looked at exposure to smokes, to other toxic chemicals, petrochemicals, and so forth, all that were part of that battlefield experience, and I came to the conclusion that at least one of the explanations was multiple chemical sensitivity, something where a variety of toxic elements even at low levels by themselves in combination may in susceptible individuals be causing these illnesses, and I believe so much more work needs to be done on that, but it is clearly one of the explanations.

I was privileged to work with Alison Johnson as she did research on the role of chemical exposure to the unexplained illnesses of Gulf War veterans. Her works on toxins and chemical sensitivity with their attendant health effects are landmarks in a poorly understood field.

**SFC Roy Twymon:** Since I’ve been back from the Gulf War, you know, I also notice that a lot of things bother me that never bothered me before. Different perfume, different cologne, gas, different smell of even smoke or cigarettes, you
know, I just automatically get sick, and sometimes it takes me days or weeks to recover. One day I was on the elevator and someone got on there with some loud perfume, and then all of a sudden it hit me, and I got lightheaded.

**Narrator:** Roy’s blood pressure shot up so high that the emergency room staff thought he was having a heart attack. He ended up spending four days in the hospital.

**Christine Oliver, MD:** In June of 2009, the CDC put on its internal website an indoor air environmental quality policy intended to maintain good indoor air quality in buildings in which its employees work. Among other things, the CDC policy states:

Scented or fragranced products are prohibited at all times in all interior space owned, rented, or leased by the CDC. This includes the use of the following products:

- Incense, candles, or reed diffusers
- Fragrance-emitting devices of any kind
- Wall-mounted devices, similar to fragrance-emitting devices, that operate automatically or by pushing a button to dispense deodorizers or disinfectants
- Potpourri
- Plug-in or spray air fresheners
- Urinal or toilet blocks
- Other fragranced deodorizer or reodorizer products
In addition, the CDC encourages employees to be as fragrance-free as possible when they arrive in the workplace. Fragrance is not appropriate for a professional work environment, and the use of some products with fragrance may be detrimental to the health of workers with the following: chemical sensitivities, allergies, asthma, and chronic headaches/migraines.

**Narrator:** It is important to note that the EPA website lists air fresheners as a source of indoor air pollution and that the CDC Indoor Air Quality Policy bans essential oils in all CDC facilities. 15 seconds

**Jeff May:** So I actually had a client who was chemically sensitive, and I was going to the house to sort of help her, and I found in her bedroom she had a whole row of small bottles of essential oils, and the whole place just reeked of chemicals basically. So essential oils are really nothing more than, you know, than chemicals. It’s just they’re not synthetic

**Christine Oliver, MD:** The CDC Indoor air policy is a very important policy and provides an example of what we should be doing in every workplace in the country. I think all workplaces should be fragrance-free. The number of people who are chemically sensitive and/or with diagnosed MCS is increasing on a daily basis. A fragrance-free policy allows these individuals who are chemically sensitive to continue their employment. As a result, they do not have to turn to Social Security Disability for income.

**Narrator:** The website of the Chemical Sensitivity Foundation contains a bibliography of research articles on chemical sensitivity that have been published...
in peer-reviewed journals in the United States, Japan, France, Italy, Spain, Denmark, Sweden, and other countries. The entire 13-page Centers for Disease Control policy on Indoor Environmental Quality is also available on that website, as are many other documents relating to fragrance-free workplaces.

On October 23, 2016, an important new study was published in *Air Quality and Atmospheric Health*, by Dr. Anne Steinemann, a civil engineer with a PhD from Stanford who has taught at Georgia Tech and the University of Washington and now holds a chair at the University of Melbourne. Her article titled *Fragranced Consumer Products: Exposures and Effects from Emissions* describes the results of her nationally representative population survey in the United States. Among the most important results are the following:

- Over 50% of Americans surveyed would prefer fragrance-free workplaces.

- Over 50% would prefer that health care facilities and professionals were fragrance-free.

- More than twice as many customers would choose hotels and airplanes without fragranced air than with fragranced air.

**Hugh Kaufman:** One of the things that we uncovered at EPA doing investigations of releases of hazardous material is large numbers of people where there are releases start to develop what we call chemical sensitivity, and so we’re seeing health effects to the public around hazardous sites like the World Trade Center a year, two years, three years down the line, where people are now sensitive
to chemicals. A little bit of perfume, for example, which would not affect anybody, can make people deathly ill.

**John Sferazo:** Since 9/11, the smell of gasoline and diesel fuel is such that I don’t get out and even fuel my own vehicles. I don’t even want it on my hands because of the odor. Being around the job sites and being around the smell of the diesel and gasoline, I am so symptomatic to that involvement that I was constantly getting problems with my throat, I would wind up going hoarse, and I would lose my voice, sometimes. The next thing you know from a sore throat, I’d have a chest infection, I get lung infections, then I get pneumonia, and this never ever happened to me before in my life. Now the smell of smoke actually ensickens me, sometimes giving me headaches. I know I can’t use any type of cologne or aftershave. I can’t take that smell, it’s sort of like a burning inside my nostrils.

**Bonnie Giebfried:** We were one of the first units into the South Tower. We got three individuals out of the South Tower. The last thing I remember seeing actually was a helicopter trying to go on one of the towers to get people off the tower, hearing, you know, someone say it was going to blow, and a humongous fire ball; it looked like a meteor coming at us.

**Narrator:** Bonnie had never had asthma before 9/11, but by the time the day was over, she had had three bad asthma attacks.

**Bonnie Giebfried:** People just don’t understand not being able to catch your breath, not being able to fill your lungs. It’s such a horrible, horrible feeling. It feels like someone’s crushing your chest, and basically sucking everything out of you. I can’t be in restaurants because God forbid someone has perfume on. I can
go into a fit. I can feel nauseous and throw up. My throat can close up. The multiple chemical sensitivity issues that have come from 9/11 have not been addressed. Household cleaners. Oh, my God, you just might just as well pack me up at that point and just send me to the hospital.

**Joel Kupferman:** I’ve been tracking the firefighters post-9/11, and what many, many have told me and their medical reports have shown that they’ve become hypersensitive to other chemicals that are out there. They could be fine for a while, they have, you know, respiratory problems. They’re on 3/4 time, meaning that they’re not on active duty, and boom, they’ll come across perfume or other chemicals out there, even household cleaning chemicals, and they’ll just become immobilized, and some of them just become so sick that they can’t, they basically can’t function on a daily level.

**Stephen Levin, MD:** Another striking thing is that many of our patients are much more reactive to strong odors than they were before, not always with exactly the same reaction that they’ll experience when they are exposed to cigarette smoke or bus exhaust, but they notice these odors more and find themselves reacting physically unpleasantly to these odors in ways they never did before. I have patients who cannot walk into a department store cosmetic area without experiencing shortness of breath and chest tightness in ways they never did before. I have patients who cannot get on an elevator where someone is wearing strong perfume or cologne without experiencing fairly intense respiratory reactions. We don’t always understand why this is so, but it is extremely commonly reported among our World Trade Center responders and many of our patients say that they are simply unable to wear fragrances themselves or be around other family
members, friends, who wear such fragrances because they simply can’t tolerate them.

Common MCS Symptoms

Headaches
Migraines
Extreme fatigue
Muscle pains
Joint pains
Difficulty concentrating
Insomnia
Irregular heart beat
Asthma
Sinus problems
Depression
Eczema
Rashes
Memory problems
Anxiety
Bloating
Nausea
Vomiting
Intestinal problems
Seizures
Narrator: One reason that the medical profession has found it difficult to understand multiple chemical sensitivity, or MCS, is that patients with MCS can have a wide variety of symptoms as the result of chemical exposures, with different patients having different symptoms. A given patient, however, will usually have the same symptom in response to a given exposure, perhaps getting a headache after exposure to paint or getting arthritic pains after exposure to natural gas.

Narrator: Dr. Anne Steinemann has analyzed the secret ingredients in several leading fragranced products like air fresheners and laundry products. She has found significant numbers of toxic chemicals in these products. Dr. Steinemann’s website, www.drsteinemann.com, contains extensive information about her studies.

Narrator: In the last couple of decades, there has been a rapid and alarming acceleration in the number of people reporting that they have developed chemical sensitivity. In 2009 Professors Stanley Caress and Anne Steinemann published in The Journal of Environmental Health the results of their national prevalence study of chemical sensitivity. In this national prevalence survey, 3.2 percent of the respondents said that they had been medically diagnosed with MCS. This result suggests that over ten million Americans are suffering from multiple chemical sensitivity. That's a number greater than the population of the state of Michigan.

Alison: Here’s another place where you can find fresh air. I’m at the home of my Santa Fe film partner, Richard Startzman. With so many people now suffering from MCS, it is important that the media treat this issue in a responsible way. The millions of Americans struggling with this condition are ill served by the
propensity of the media to rush to Arizona to film and interview members of a tiny community of fewer than two dozen people who constitute extreme cases that are not representative of the vast majority of people who are chemically sensitive. This kind of one-stop shopping on the part of journalists and filmmakers may be convenient, but it results in a very distorted view of people with MCS. Depicting these outliers in a way that makes them look weird and sensational may advance the careers of the photographers, journalists, and filmmakers, but at a great cost for the millions of people with MCS who are trying to get their family, friends, and physicians to understand the condition of MCS, not to view it with disbelief.

Unfortunately, the suicide rate among people with multiple chemical sensitivity is far too high, and the failure of others to understand MCS is a factor in many of these suicides.

Jeff May: Well, I had one really good example of how people can get sick by being exposed to chemicals in their air. I was investigating a house where an older couple were quite ill from very serious chemicals that were being emitted by their heating system. And I walked into that house, and I kind of forgot why I was there. I mean the chemical smell was so strong and overpowering that I couldn’t think straight, so I had to go back and put on a charcoal respirator. So I’m very sympathetic to the fact that people can think better in cleaner air. And actually, Harvard University just published a study they did in Environmental Health Perspectives on the effect of indoor air quality on cognition. And they used engineers, architects, programmers, very sort of high-level-thinking people, and they exposed them to different environments. So they had a conventional office building environment, they had what they called a green building environment, and then a green building plus environment, which had a lot more fresh air. And the
actual, the results of that study were very, very dramatic. They showed that people who were exposed to the green building environment, they could have 60% better scores on the cognition testing. And the green plus building conditions, which was a great deal, it was 100% fresh air rather than recirculated air, they actually had 100% better cognition, so it’s very dramatic. People think better and actually work better; there’s an economic impact to all this as well. So VOCS also are fragrances, so it isn’t just the chemicals that they’re using or that are being emitted by the furnishings that can cause problems, but it’s also the fragrances that people are wearing.

**Alison:** One particularly poignant case is that of Abner Fisch. Abner was a chemical engineer who worked for 3M until chemical exposures on that job made him so sick that he had to quit. Abner later testified to a government committee in Santa Fe, New Mexico, about his long search for a workplace atmosphere that he could tolerate. In my book *Amputated Lives: Coping with Chemical Sensitivity*, I recorded Abner’s description of the twenty different jobs he tried in his long struggle. Here is the way Abner described one of the last jobs he tried:

> I was flipping burgers and running a cash register, and I got a very good performance evaluation after two months and after four months, but when they hired new employees who wore perfume and kept scheduling me with them, I had to resign.

Six months after he gave this testimony Abner took his own life.
Narrator: It’s not the end of the world if you can’t wear your favorite perfume but exposure to fragrance in the workplace did mean the end of the world for Abner Fisch.

Cathy Gustafson: My name is Cathy Gustafson, I’m a registered nurse, and I’m the director of assisted living at the Highlands in Topsham, Maine. We’re an assisted living community, and we do maintain a fragrance-free environment for the well being of our residents that live here as well as the staff that work here. Over the years I’ve been able to see what the result of lots of chemicals can do to somebody, especially somebody with a breathing disorder like COPD or asthma.

In an assisted living environment or in a nursing home, there are a lot of people who struggle with incontinence, and one of the things that’s the result of that can be odors. We certainly don’t want somebody to walk through the front door and be greeted with unpleasant smells. So it’s important for us that we make sure the residents are taken well care of. That will minimize the odors. But if we do need to use some kind of a cleaning product, we go with something that’s fragrance-free and also something that’s green, so it’s also good for our environment.

I would encourage other assisted living communities and nursing homes to explore the option of going fragrance free in the environment. It’s good for the residents, it’s good for the staff and for the visitors. We don’t want to subject anybody in our community to have an exacerbation of their disease because of smells that we’ve put in the air, so we’ve eliminated air fresheners and all chemicals that we use are fragrance free. It was not a difficult process to become fragrance free, so please, I ask you for the benefit of the community that you work in to explore that option.
Richard Startzman: My wife and I have a dear friend who suffered a severe brain aneurysm that landed him in a nursing home for over two years. Of course we wanted to visit often, but we soon discovered that the citrus-scented air freshener was so intense that we reacted to it very strongly. The result was that we didn’t visit as often as we liked. Finally we told the staff that the so-called air freshener was preventing us from visiting or staying very long. We aren’t very reactive to chemicals, but that air freshener was an instant headache-maker and it affected our relationship with a dear friend who really needed us.

Alison Johnson: Most days I spend a few hours at this computer either working on my books and films or reading about potentially important research relating to chemical sensitivity or reading emails from people whose chemical sensitivity is disrupting their lives to such an extent that they are desperately searching for help on the Internet and have found the website of my Chemical Sensitivity Foundation.

Three or four phone calls a day come in on the Foundation phone line and speaking with these people has more than ever convinced me that fragrance sensitivity and the larger issue of MCS, or multiple chemical sensitivity, is growing at an alarming rate.

In the last two decades, I’ve seen a dramatic increase in the number of people contacting me who are finding exposure to fragranced products an almost overwhelming problem that is driving them out of the workplace or disrupting their family life and their social life. In far too many of these cases these people are looking at frightening options for the future.
Trying to live on less than a thousand dollars a month from public assistance is a daunting prospect. And I think that many of these people are saying over and over to themselves, “I can’t live under a bridge.”

After I read one of these desperate emails or talk by phone with someone who is overwhelmed by the problems facing them, there are many times when I can’t help thinking “that’s a suicide waiting to happen.” How can you help me help these people? Here’s an important way you can help ensure that people who are sensitive to fragrances can remain in the workplace instead of being haunted by the image of sleeping rolled up in a blanket under a bridge.

The first thing you will see on the website of the Chemical Sensitivity is the image of one of these cards showing a breaking ocean wave with above it the words “Fragrance-Free Workplaces: Wave of the Future?”

Below that image you can click to request that the Chemical Sensitivity Foundation send you some of these Fragrance-Free Workplaces cards so you can hand them out to friends, family members, employers, physicians, business owners, or government officials.

On that same homepage for the Chemical Sensitivity Foundation, you can click on a button to donate to the foundation so that we can hasten the day that fragrance encounters in the workplace and elsewhere no longer have a devastating impact on the lives of people like Chris Markham.

*Video Clip of Chris Markham choking*
Alison Freeman: Singing:

Good-bye and fare you well
May naught but good attend ye
All around the wide world
Where sailors’ luck may send ye
Up and down the deep seas,
Back across the line
And you’ll go your way,
And I’ll go mine.
And you’ll go your way,
And I’ll go mine.

The End

Credits

A Johnson/Startzman Film

Produced & Directed by
Alison Johnson

Artistic Director &
Cinematographer
Richard Startzman

Narrator
Ron Chraft
Post-Production
CinéVision Productions

To order this film or other
Johnson/Startzman films
and Alison Johnson’s books on
Gulf War Syndrome, 9/11, and
Multiple Chemical Sensitivity, see
www.alisonjohnsonmcs.com

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