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100% Effective Natural Hormone Treatment
Menopause, Andropause And Other Hormone Imbalances
Impair Healthy Healing In People Over The Age Of 30!

Multiple Chemical Sensitivity Syndrome

By Kathy Browning

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Multiple chemical sensitivity (MCS) has been described under various names since the 1940s. Referred to as Environmental Illness in the late 40's, and Total Allergy Disease in the 21st century, multiple chemical sensitivity is a syndrome in which multiple symptoms reportedly occur with low-level chemical exposure. Several theories have been offered to explain the cause of MCS, including allergy, toxic effects and neurobiologic sensitization. There is insufficient scientific evidence to confirm a relationship between any of these possible causes and symptoms.

MCS syndrome has led to great controversy among clinicians, researchers, patients, lawyers, legislators and regulatory agencies. The absence of scientific agreement on MCS has contributed to the development of emotionally charged, extreme and entrenched positions.

Patients with multiple chemical sensitivity syndrome can have severe symptoms that interfere with daily life and work. Virtually any symptom has been attributed to the syndrome, but the symptoms generally occur in one of three categories: central nervous system, respiratory and mucosal irritation, or gastrointestinal problems.

Common symptoms include fatigue, difficulty concentrating, depressed mood, memory loss, weakness, dizziness, headaches, heat intolerance and arthralgias (joint pains). The typical individual with MCS feels very strongly that the symptoms result from chemical exposure.

Let's say, you walk into the restroom of your office building, catch a whiff of the deodorizer and cleaning chemicals, and emerge a minute later, short of breath, shaking, and feeling like your brain is on vacation. You can barely put sentences together to describe what happened in there. Your friends visit the restroom, and don't have any "trouble". If this sort of thing happens to you, perhaps you are suffering from MCS.

The following list of chemicals could produce MCS symptoms: Aerosol air freshener; Aerosol deodorant; After-shave lotion; Asphalt pavement; Cigar smoke and Cigarette smoke; Colognes and perfumes; Diesel exhaust and Diesel fuel; Dry-cleaning fluid; Floor cleaner; Furniture polish; Garage

Multiple Chemical Sensitivity Syndrome

fumes; Gasoline exhaust; Hair spray; Insect repellent; Insecticide spray; Laundry detergent; Marking pens; Nail polish and Nail polish remover; Oil-based paint; Paint thinner; Perfumes in cosmetics; Public restroom deodorizers; Shampoo; Tar fumes from roof or road; Tile cleaners; Varnish, shellac, and lacquer.

If you suspect you are suffering from MCS, it is important to obtain quality health care. Insist upon a careful initial history, physical examination and basic laboratory investigation. You deserve a compassionate evaluation and management from a clinician who is sympathetic to you, but who also will protect you from unwarranted, dangerous, expensive or unproven evaluation and management.

Educate yourself about the topic. Knowledge is power and you will discover there are not many physicians who are well informed about MCS. Many say it doesn't exist, others do not understand it,

nor do they do how to treat you. I highly recommend finding a practitioner who specializes in this field or seek out a certified nutrition counselor or alternative health care provider.

Listed below are sites which offer additional information, as well as conventional and alternative healing modalities. Treat yourself to a healthy dose of knowledge. Your body will reward you for it!

<http://www.ourlittleplace.com/mcs.html>

http://www.disabilitystudies.com/MCS_Reources.htm

<http://www.cfs-news.org/mcs.htm>

About the author - Kathy Browning is a healing arts practitioner and wellness coach. She is also the Editor-In-Chief of "The Art of Living Well", an ezine focused on the mind, body, spirit connection and the author of "Feng Shui for Abundant Living". Be sure to visit <http://www.cancercomfort.com> for more information.

Aspirin Sensitivity, The Basic Truth

By Charlene J. Nuble

Contrary to what your folks usually think, and from what you may have heard while growing up, aspirin sensitivity is not an allergy. Though, the effects and symptoms of the case can be somehow depicting and similar to those of allergies, aspirin sensitivity is not and will never be a true allergy.

Though, aspirin sensitivity may result in adverse and similar to allergy type of reactions in affected persons.

Usually, reported cases of aspirin sensitivity are linked to those who contract moderate to almost severe form of asthma and also to chronic sinusitis.

Severity of asthma raises the susceptibility of one person to the disease. Advancing age or simply put, aging, also is a great factor that leads to aspirin sensitivity.

Multiple Chemical Sensitivity Syndrome

Take note that according to a modern study in the medicine discipline, nine out of ten, or 90%, of people who are diagnosed or described as aspirin sensitive are at the same time sensitive or manifest adverse reaction to allergy-causing drugs, foods and inhalants.

A brief history of aspirin sensitivity

Aspirin is one of the most common over-the-counter drug that is taken by people with mild fever, body aches and other mild ailments. Nowadays, aspirin tablets are also taken as a preventive drug against heart attacks or strokes.

But did you know that aspirin simultaneously originated from Egypt, Assyria and Greece. In those ancient civilizations, aspirin was in the form of a white willow bark that was then used to treat fever and pain.

The ancient Greeks, Assyrians and Egyptians also used that white willow bark, now identified as aspirin, to treat sore muscles, chills, rheumatism and headaches. The native American tribes also had the knowledge of such practices.

In 1828, salicin which was an active and stand out ingredient or chemical from the willow bark was isolated. Ten years after, in 1838, salicylic acid was first produced from hydrolysis and oxidation of salicin. In 1893, the first modern form of aspirin was produced.

The drug company Bayer secured the rights to the aspirin official trade mark and name on March 6, 1899. The rest, as they say, is a common and prolonged history.

Symptoms and Treatment

Because aspirin is so widely used today, it is somehow surprising that the drug produces sensitivity to certain people. Aspirin sensitivity almost always show up or manifest as rhinitis or what we call nasal congestion.

Aspirin sensitivity can also be mistaken for asthma or hives because the symptoms and signs of ailment are almost the same.

Through several experiments, you can determine if you are sensitive to aspirin. Take the following steps. First, take a very small dose of aspirin. Be very particular, small dose, or you might end up somewhere very unlikely if ever you are sensitive to aspirin.

After taking the small dosage, observe yourself for any sign of cough or wheezing. There will come out itchy rashes around the mouth area and watery eyes and nasal congestion is evident.

In some rare conditions, aspirin sensitivity can also cause the development of anaphylaxis or breathing difficulty, which is an allergic reaction common to bee stings. There will also be severe decline in the patient's blood pressure.

Multiple Chemical Sensitivity Syndrome

If you are diagnosed with aspirin sensitivity, desensitization can be done under intense and monitored medical supervision. This can be funny, but such desensitization will involve taking in very little dosages of aspirin everyday until the sensitivity is gone.

If an aspirin sensitivity attack is taking place, it is best to seek immediate medical help and attention. No drugs should be taken without the doctor's prescription or administration, because adverse reaction to other drugs can lead to fatality.

To prevent aspirin sensitivity attacks, it is advise that you avoid taking in, of course, aspirin or other anti-inflammatory medicines or NSAIDs like naproxen and ibuprofen.

Charlene J. Nuble 2006. For answers to All your frequently asked questions about aspirin sensitivity, please go to:



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