My Story of Electromagnetic Hypersensitivity (EHS)

My name is Mette Kenfelt. I am 61 years old, live in Denmark, and am now on permanent disability pension due to permanently reduced functional capacity.

It is difficult to explain how something you can neither see, hear, nor smell can change a person's life so profoundly.

But that is what has happened to me.

My serious health symptoms are, in my experience, clearly connected to the environments I am in. I experience a repeated pattern: In environments with wireless technology, I become significantly worse, and when the exposure is reduced or removed, I improve.

That is why I also feel a responsibility to tell my story.

My Life Before

Before this, I lived an active family and working life, a life that I felt was in balance.

I was a mother, a wife, and a business owner and executive. I have been self-employed for most of my working life and spent many years working in a field where digital technology played a major role. Most recently, I worked as a senior partner in executive search.

I have always been curious and solution-oriented and very conscious of how I communicate with others, with respect for the person in front of me. I am driven by a desire to make a difference and help others.

Communication has therefore been a natural part of my work and of who I am. I was accustomed to communicating clearly, getting people to listen, creating engagement, and motivating others. If a problem arose, my natural instinct was to investigate it and find a solution.

Sport and physical activity were also a major part of my life. I ran, worked out, and played competitive golf at an elite level for many years. In 2018, I became Danish Senior Stroke Play Champion.

We traveled extensively, both in summer and winter. Ski trips, golf trips, and other experiences were a natural part of our lives. I could pack a suitcase, get on a plane, stay at a hotel, go to a restaurant, visit friends, or attend an event without first having to investigate the surroundings.

I just did it.

I never thought about that freedom. I took it for granted.

For many years, I have focused on living a healthy lifestyle. I do not smoke or drink alcohol, I have maintained roughly the same weight throughout my adult life, and I have been conscious of my diet and chosen organic food whenever possible.

And I was a frequent user of modern technology. Computers, mobile phones, and wireless internet were a completely natural part of both my professional and private life.

I was not afraid of wireless technology. I did not think about it at all.

The First Signs That Something Had Changed

I had always been healthy and was used to my body functioning normally. But gradually, I began to notice that certain things in my environment were bothering me.

I developed reactions to, among other things, formaldehyde, black rubber, and pollen, and in 2020 I was diagnosed with MCS (Multiple Chemical Sensitivity) at the Allergy Center at Gentofte Hospital.

Over time, I learned to live with and navigate this. A nasal filter, for example, can help reduce some of my reactions.

I could still work, travel, exercise, and live an active life.

But toward the end of 2022, something began to happen that felt completely different.

I began experiencing an intense and almost constant noise in my head. It is neither a headache nor tinnitus. At the same time, I developed dizziness, nausea, balance problems, trembling in my body, exhaustion, sleep problems, and difficulties with concentration, memory, and speech. When strongly affected, I can also feel a trembling sensation in my heart.

At first, I did not understand what was happening to me. But gradually, I began to see a pattern:

The more time I spent around Wi-Fi, mobile phones, and other wireless equipment, the worse I felt. When I moved away, my symptoms could subside.

During an extended stay with my father, who did not have Wi-Fi, I experienced a clear improvement. This led me to investigate my surroundings more closely.

We installed wired internet and a landline and reduced the wireless sources in our home. I began sleeping in a shielding tent and later moved to a home in an area with significantly lower levels of radiofrequency radiation, which I have also been able to confirm through my own measurements.

Today, my RF meter has become an important tool in my daily life. I use it to assess my surroundings so that, as far as possible, I can avoid areas with higher exposure before I become unwell and my symptoms intensify.

It made a difference. But it did not give me my old life back.

Today, a Few Minutes Can Cost Me Several Days

My sensitivity has become more pronounced over time.

Today, even a very brief period in a wireless environment can be followed by several days of symptoms.

When I am severely affected, I lose the ability to function normally. My concentration and memory fail, and I can lose my words and my ability to carry on an ordinary conversation.

That, in particular, is deeply distressing and a world away from the person I have always been.

Communication has been one of my strengths throughout my life. I have been accustomed to communicating clearly, getting people to listen, and motivating others.

Suddenly, the words can simply be gone. I know what I want to say, but I cannot put it into words.

When I am severely affected, I feel as though I am "staggering around," and I am simply unable to do anything at all. Even after I have moved away, it can take several days before I return to what is now my normal level of functioning.

It is therefore not simply a matter of discomfort. **It affects my ability to think, communicate, move around freely, and function in ordinary daily life.**

Nor is it only about Wi-Fi indoors. Even outdoors, I can become unwell if I get too close to people with active mobile phones. If I do not move away, my symptoms intensify.

I also experience strong reactions in areas with exposure from mobile phone towers, where I have been able to measure the radiofrequency radiation myself with my RF meter.

Even on a golf course, there can be places where I cannot stay.

It is a strange contrast: **I can be standing in the middle of nature and still have to leave.**

In Many Ways, I Live in a Parallel Society

The consequences are perhaps felt most strongly in the ordinary things that used to make up my life.

I can no longer participate in normal working life, visit clients and business associates, or move freely around as I did before.

Shops, public transportation, restaurants, hotels, hairdressers, fitness centers, concerts, or simply a walk through Copenhagen can be inaccessible to me because of the many wireless sources and active mobile phones around me.

Even a visit to the dentist requires prior arrangements and adaptations to the environment before I can attend.

But it also affects my family and social life.

Fortunately, my immediate family accepts my situation and does a great deal to make it possible for me to continue to be included. **But it requires constant adjustments.**

Weddings, birthdays, dinners, and ordinary social gatherings are no longer things I can simply attend.

If there is Wi-Fi and active mobile phones around me, I cannot be there. If I am to participate, the Wi-Fi must be turned off, and the people I am with must accept that their mobile phones cannot be active around me.

I am very grateful for that.

But this is not how I want to live.

I am a mother and now also a grandmother. I want to be able to attend birthdays, weddings, family visits, and those small spontaneous moments together, just like everyone else, without the environment first having to be adapted for me.

Sometimes my family can create the conditions I need. Other times, it is not possible, **and then I have to stay away.**

It is not a matter of simply enduring it a little longer. I react within just a few minutes, and afterward it can take several days before I return to what is now my normal level of functioning.

My brain, in particular, is affected. My concentration, memory, and ability to find words can fail, the very functions I have depended on throughout my working life.

That price is simply too high for my health.

In many ways, I therefore feel that I live in a parallel society. I can see ordinary life around me and want to be part of it, but I can only participate when the environment makes it possible.

I have not lost my desire to be part of the community. But I can no longer participate on the same terms as everyone else.

This became most painful for me when my husband became seriously ill.

I Could Not Be With My Seriously Ill Husband

In December 2024, my husband, Jørgen, was critically ill.

He had spent two and a half weeks in the intensive care unit at Gentofte Hospital, where I was able to visit him. Shortly before Christmas, he was transferred to a new, high-tech unit at Herlev Hospital.

Of course, I wanted to be with him.

But I reacted so strongly during my visits to Herlev that after only a short time I had to leave the hospital again.

It felt terrible and inhumane, and it affected me deeply that I could not be with my own husband while he was seriously and critically ill. Fortunately, our daughters were able to be with him.

I had not lost the desire to be with him. I had lost the ability to do so.

My Doctor Saw It Happen

On May 1, 2025, I had to be examined by my general practitioner in connection with my disability pension case because my functional capacity had become so limited that I was no longer able to support myself through my work.

It was, and still is, a difficult realization. I have worked my entire adult life, been a self-employed business owner for most of it, and always been accustomed to supporting myself.

My doctor had known me since 2017 and, through our telephone conversations, had heard me describe what was happening to me. But in connection with my case, I had to attend the clinic in person.

I arrived feeling well, clear-headed, and functioning normally.

After about 20 minutes in the consultation, my condition changed markedly.

This time, my doctor did not just hear me describe it.

He saw it happen in front of him.

In his medical certificate, he described how I became progressively unwell and, after about 20 minutes of conversation, **"cognitively shut down."** At the time, there was wireless internet in the consultation room.

The medical certificate dated May 1, 2025, is attached to this account.

My husband was with me. When it was time to go home, I was unable to drive the car myself. He had to drive us home.

It took me about six days to return more or less to the level of functioning I had before that visit.

Later, my doctor happily told me that the clinic had installed a wired network, **so that I could come to the clinic again.**

To me, this demonstrates something very concrete:

Relatively simple changes to the environment can make the difference between inclusion and exclusion.

My doctor assessed that my functional capacity was so severely impaired that I was unable to work, even with accommodations. He also stated that work-capacity assessments or other employment-related measures would worsen my condition.

I was subsequently granted permanent disability pension.

Perhaps We Are the Canaries in the Coal Mine

After I became ill myself, I began seriously investigating this subject.

Only then did I become aware that researchers and professionals had for many years raised concerns about possible biological and health effects of radiofrequency electromagnetic fields.

I did not know that.

As an ordinary member of the public, I had never been given the impression that there could be a health risk associated with the wireless technology I used every day.

Only after I became ill did I begin to find research and professional warnings that had existed for years.

This has led me to ask a question that I believe is important:

What if people with EHS react more quickly and more noticeably than others?

Perhaps I am unusually sensitive. Perhaps there are only a few of us. I do not know.

But perhaps the strong and rapidly noticeable reactions that I and other people with EHS describe are also a warning signal worth investigating.

Because what if not all potential effects are felt immediately?

My story cannot tell us whether other people may be affected in different ways or only after longer periods of exposure. Nor can it, by itself, explain what is happening biologically in my own body.

But precisely because we do not know, I believe we should investigate it, not least when it comes to **children and other vulnerable groups.**

That is why the image of the **canary in the coal mine** makes sense to me.

Miners took canaries down into coal mines because the birds could react to dangerous gases before the miners themselves sensed the danger.

I cannot help wondering whether people with EHS might react in a similar way, earlier and more noticeably to something in our environment that others do not immediately perceive.

This does not mean that our reactions prove what happens to others. But perhaps they are a signal that we should take seriously and investigate further.

What About the Children?

Children are the ones I think about most.

I am an adult. I have lived most of my life without these symptoms.

I have a before and an after.

I know how my brain functioned before. I know what it felt like to be able to think clearly, concentrate, remember, speak, work, and play sports without these symptoms.

A young child does not necessarily have that point of comparison.

Children today grow up surrounded by mobile phones, Wi-Fi, tablets, computers, and other wireless technologies from a very early age.

If a child experiences fatigue, restlessness, sleep problems, or difficulties with concentration and learning, there can of course be many different causes. **I am not claiming that such problems are caused by RF exposure.**

But if some children were particularly sensitive, **how would we discover it?**

A young child cannot necessarily say:

"Something in my environment is changing the way my head works."

And the child may never have known a different environment with which to compare it.

How are parents supposed to know what to look for if they have no knowledge that this may even be a possibility, and the exposure can neither be seen, heard, nor smelled?

That is a question I believe we should be curious enough to investigate.

We Are Not Exposed to Just One Thing at a Time

My own progression, from first reacting to certain chemical exposures to later also experiencing such strong reactions in wireless environments, has made me think more broadly.

Human beings do not live in a laboratory where we encounter one exposure at a time.

Our bodies and brains function, among other things, through electrical and electrochemical processes. At the same time, throughout our lives we encounter radiofrequency electromagnetic fields and many different chemical and other environmental exposures through, among other things, air, drinking water, food, medicines, vaccines, and consumer products.

There are safety assessments and exposure limits or reference levels in many of these areas. **For radiofrequency electromagnetic fields, the current exposure limits for the general public are not differentiated, for example, between children and adults.** At the same time, different environmental exposures are often assessed separately within their respective fields.

This leads me to ask:

What about the whole person in the total environment?

What does age and particular vulnerability mean? What does exposure over an entire lifetime mean? And what does it mean when many different exposures occur simultaneously?

I do not know the answers.

That is precisely why I believe these questions should be investigated thoroughly and independently.

Why I Am Telling My Story

I am not opposed to technology. I used it intensively myself for many years, both privately and professionally.

My personal story is not, in itself, scientific proof.

But it is my reality.

I went from being self-employed, professionally active, social, and a competitive athlete to being on permanent disability pension and dependent on a highly adapted environment in order to function.

I am still the same person. I still want to work, play golf, travel, spend time with family and friends, and now be a grandmother and a natural part of my grandchild's life.

It is not my desire to participate in life that has changed. It is my ability to do so.

That is why I am telling my story.

I hope it can help ensure that people with experiences like mine are taken seriously, and that we remain curious about what we do not yet understand.

We do not need to know all the answers before we begin asking the questions.

We need to investigate them.

We need to be willing to listen.

And above all, we owe it to our children to find out.

Mette Kenfelt
Denmark

Attachments

- Medical Certificate dated May 1, 2025
- *Scientific Literature Relevant to My Symptoms*