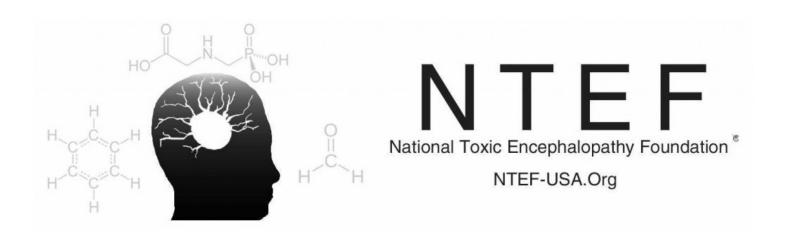
NTEF challenges the Lack of Effective Implementation of the AMA's Fragrance Free Initiative



Las Vegas, Nevada Dec 10, 2025 (<u>Issuewire.com</u>) - The National Toxic Encephalopathy Foundation (<u>NTEF</u>), a medical and environmental health organization, has significant concerns about the initiative proposed by the American Medical Association (AMA).

During their Annual Meeting in June 2025, the AMA introduced an <u>initiative</u> (pages 88-97/140) focused on fragrances. The research shared was merely a summary of the effects of fragrances on a range of diagnoses that are not yet fully recognized by the allopathic medical community, nor have any definitive ICD Codes.

For many years, the AMA has dismissed patients' concerns regarding environmental exposures, labeling them as 'anxiety, depression, and hypochondria' and attributing these issues to psychological rather than physiological causation. Given the rising number of products marketed as 'fragrance-free', one would have expected that the AMA would have embraced the CDC's 'Indoor Environmental Quality Policy' produced on June 22, 2009. The selective policy approaches by the AMA regarding what they want to endorse from the CDC are unacceptable. They strongly endorsed vaccines, and now, nearly two decades later, they are looking into fragrance issues.

In their draft summary, they merely stated, 'We don't know why this occurs, we need to create a database, etc.' They acknowledged the issue, provided a historical context, but failed to propose any clearly defined solutions regarding patient treatment.

This demographic requires more than a 'we have a problem' mindset; they need a thorough and enforceable solution, which the AMA initiative lacks. There was no mention of the extent of personal and professional lifestyle changes that need to be implemented by its members, if they are going to promote a fragrance-free initiative.

They noted that some entities adopted a 'flexible' approach instead of a strict ban on fragrances. Fragrance-free environments have been established across various industries, some with strict enforcement of fragrance and chemical bans, denying access to visitors or patients who do not comply.

Nowhere in this draft summary was there any reference to equipment or treatments that are responsive

to these demographics.

For those who are aware of the environmental impacts, it is known that tachycardia is a frequent response to most exposures, accompanied by hypertension, RADS, cognitive dysfunction, muscular weakness, and more.

The AMA seems unaware that Coumarin, an ingredient found in fragrances, can affect blood levels of anti-coagulants. Exposure in-utero can influence brain development, potentially leading to mild neurological dysfunction in school-aged children.

They referenced the MSDS, which has been significantly condensed, resulting in the omission of crucial product information. A prime example is ScentAir, which is marketed as the largest scent-branding company globally. They target medical facilities, and AMA members often fall victim to their marketing strategies.

ScentAir asserts that they do not use any carcinogenic ingredients, yet Myrcene (CAS123-35-3) is classified as one. They provided documentation with two different reports (MSDS & SDS). The MSDS/SDS dated March 26, 2012, indicates a 'YES' for the US-California Proposition 65-Carcinogens List'. However, the SDS from July 21, 2021, claims: 'Our fragrances do NOT contain any components deemed carcinogenic by the following regulatory bodies: National Toxicology Department (NTP)'. Despite the fact that the NTP has classified Myrcene as a carcinogen since 2010.

OEHHA is the lead agency for Proposition 65 implementation, in 2014, CA listed Myrcene as a carcinogenic.

'Most physicians lack adequate training in toxicology to recognize or refer cases appropriately. Those who possess toxicology training often do not have sufficient expertise in diagnosing and identifying neurotoxicity symptoms, and may dismiss these symptoms as manifestations of pre-existing mental health disorders, such as anxiety, depression, or hypochondriasis.' -Raymond Singer, Ph.D. Board Certified Neuropsychologist, with Added Forensic Qualifications from the American Board of Professional Neuropsychology, and a 30-year Full Member of the Society of Toxicology.

The fields of environmental medicine and Indoor Air Quality are quite varied, requiring that all triggers and safer alternatives be considered. Simply eliminating anything with a fragrance will not resolve this issue.

'Until the entrenched narrow perspective of the AMA and allopaths towards non-allopaths changes, along with their reluctance to gain knowledge in this growing field, their patients will continue to endure suffering, both in terms of treatment and how they are perceived'.' - Angel DeFazio, BSAT, BCNHP, President NTEF.

Naturally, they may seem anxious or depressed; they are battling a system that disregards their concerns and imposes an arbitrary psychological diagnosis, similar to what occurs with EHS and GWS. Just as PMS was first recognized in 1931 by gynecologist Robert Frank, it took a significant amount of time for it to be acknowledged as a legitimate medical diagnosis.

This is the current state of affairs. What is needed is comprehensive training that incorporates treatments outside of the 'lock-step' allopathic mind-set. The AMA has come to the party decades too late and now thinks that they are going to be the 'saviors' to this global malady

'The MD after their name does not signify 'minor deity', they are still practicing." -said DeFazio

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