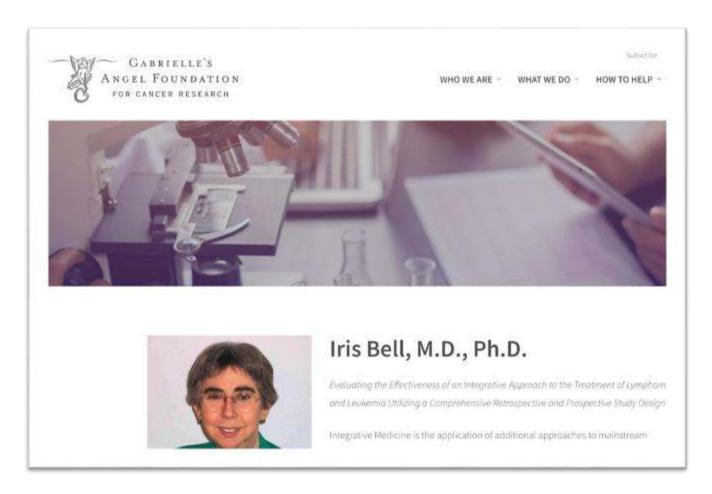
Can FLFE help reduce EMF Sensitivity? Phase I Experiments and the Gold Standard¹



¹Prepared by Gary E. Schwartz with Maria Colomy and the FLFE Research Team Lewis Humphreys, Jeff Stegman, and Paule Bellwood



How I first learned about EMF sensitivity? A personal thank you to Dr. Iris. Bell¹



Bell I. R., Schwartz G. E., et al (1997). Individual differences in neural sensitization and the role of context in illness from low level environmental chemical exposures.

Environmental Health Perspectives, 105 (Suppl 2): 457-466.



Overview of Presentation

Part 1	FLFE customer experience research and plant research as illustrations of the Gold Standard and Phase I research.
Part 2	Introduction to EMF sensitivity syndrome, the EMF sensitivity controversy, the importance of conducting replicated Phase I Research, and the Gold Standard.
Part 3	How customers helped FLFE become aware of the need for an EMF mitigation program.

- Part 4 FLFE and EMF Mitigation Phase I research findings
- Part 5 Summary and future FLFE EMF Mitigation Research

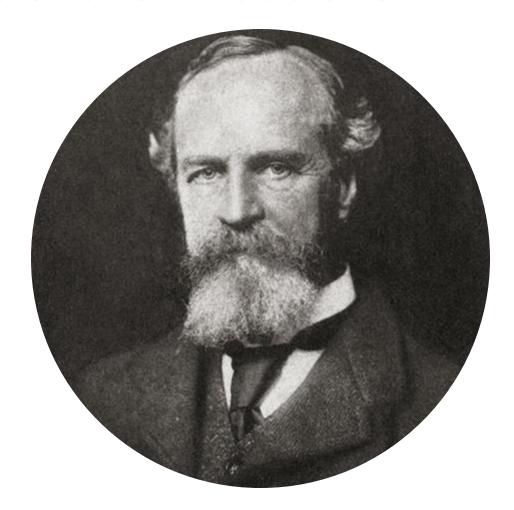


Part I: FLFE Gold Standard of Research

Professor William James from Harvard University, concept of "Radical Empiricism."

Following the data wherever it leads and being prepared for surprises.

Loving openness in science and life.





Part I: FLFE Gold Standard of Research¹

FLFE Phase I studies: Researchers formally investigate a claim or informal observations (see Phase 0 below) using preliminary experiments with a relatively small number of data points (e.g., 10). The purpose is to examine whether the claim can be demonstrated as well as to explore the magnitude of the effects.

Phase I studies address the question "Is it possible?" by demonstrating that "it happens" with statistical significance

FLFE Phase II studies: The claim is investigated with a larger number of datapoints (e.g., 80) to verify its veracity under more controlled conditions, including blinding, and to understand its mechanisms, properties and to confirm the magnitude of the effects with more statistical significance.

Phase II studies address the question "Is it understandable?" by demonstrating how and under what conditions it happens with statistical significance and blinded conditions, if possible, for the research question.

FLFE Phase III studies: The claim is investigated in an experiment with a large number of datapoints (e.g. 1000) to confirm its veracity under controlled conditions, including blinding, and to understand its mechanisms, properties, to confirm the magnitude of the effects with statistical significance and to collect information regarding a larger population of results.

Phase III (and Phase IV) studies address the question "Is it believable?" by demonstrating that "it is real" for a large population.

FLFE Phase IV studies: After a new feature is made available through the FLFE subscription service, researchers track the expression of the feature in the FLFE community population, seeking more information about the feature's benefits, and optimal use.



Part I: FLFE Gold Standard of Research¹

FLFE Phase 0 studies:

The reader will recognize that many organizations or businesses, including FLFE, typically begin with an informal process – what we might call **Phase 0** – where they determine through experiments, testimonials, focus groups, and pilot studies whether their claims appear to have the postulated effects for people using their services or products.

Also, unlike biomedical treatments, most organizations or businesses, including FLFE, do not wait for the formal completion of Phases I-III before making their services or products available to the public (Phase IV).





Customer Experience Survey A Retrospective, Phase 1 Experiment¹

¹Prepared by Gary E. Schwartz with Maria Colomy and the FLFE Research Team Lewis Humphreys, Jeff Stegman, and Paule Bellwood

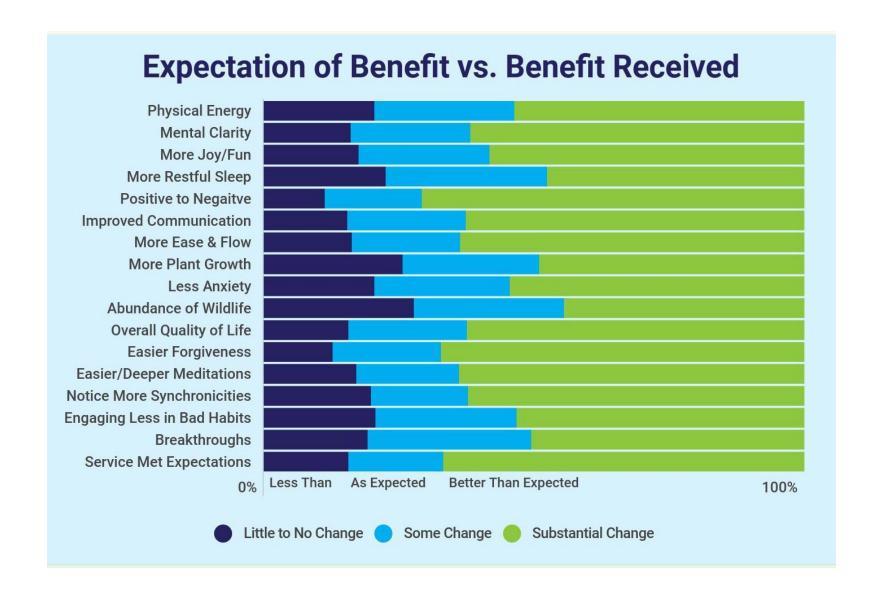


Common FLFE Experiences, Ranked by Frequency

The two most commonly experienced items while using the FLFE service are Forgiving more Easily and Choosing a Positive thought over a Negative thought.

5





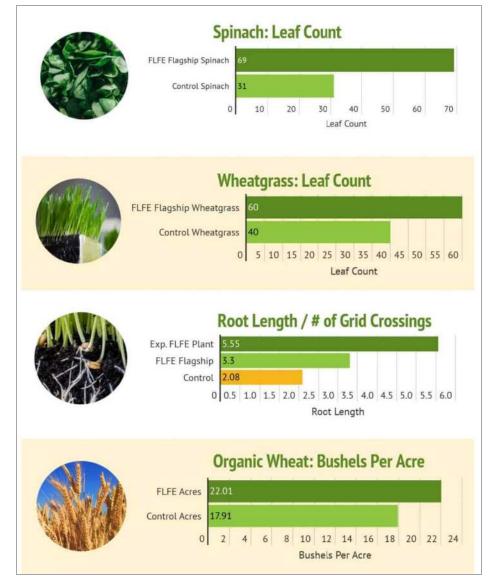


FLFE and Plant Vitality Research Phase I and II Experiments¹

¹Prepared by Gary E. Schwartz with Maria Colomy and the FLFE Research Team Lewis Humphreys, Jeff Stegman, and Paule Bellwood





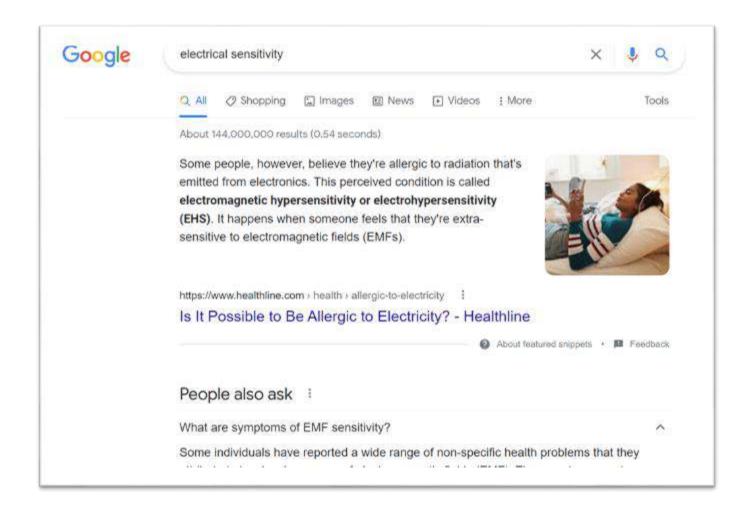




Can FLFE help reduce EMF Sensitivity? Phase I Experiments and the Gold Standard¹

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We discuss consciousness-lowering EMFs with Regina Meredith and how the FLFE technology harmonizes EMFs with shungite in this video:



HOW MIGHT YOU BE AFFECTED BY CONSCIOUSNESS-LOWERING EMFS?

Commonly known sources of EMF radiation in the home include:

- Cellphones
- Televisions and Monitors
- Microwave Ovens
- Computers
- Wi-Fi Devices
- Electrical Wiring
- Dimmer Switches
- Plumbing
- Radiant Electrical Healing
- EMF From Neighbors' Devices



















Reniese

Electrohypersensitivity as a Newly Identified and Characterized Neurologic Pathological Disorder: How to Diagnose, Treat, and Prevent It

Dominique Belpomme 1,2,3,* and Philippe Irigaray 1,2

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- European Cancer and Environment Research Institute (ECERI), 1000 Brussels, Belgium
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Received: 5 February 2020; Accepted: 5 March 2020; Published: 11 March 2020



Abstract: Since 2009, we built up a database which presently includes more than 2000 electrohypersensitivity (EHS) and/or multiple chemical sensitivity (MCS) self-reported cases. This database shows that EHS is associated in 30% of the cases with MCS, and that MCS precedes the occurrence of EHS in 37% of these EHS/MCS-associated cases. EHS and MCS can be characterized clinically by a similar symptomatic picture, and biologically by low-grade inflammation and an autoimmune response involving autoantibodies against O-myelin. Moreover, 80% of the patients with EHS present with one, two, or three detectable oxidative stress biomarkers in their peripheral blood, meaning that overall these patients present with a true objective somatic disorder. Moreover, by using ultrasonic cerebral tomosphygmography and transcranial Doppler ultrasonography, we showed that cases have a defect in the middle cerebral artery hemodynamics, and we localized a tissue pulsometric index deficiency in the capsulo-thalamic area of the temporal lobes, suggesting the involvement of the limbic system and the thalamus. Altogether, these data strongly suggest that EHS is a neurologic pathological disorder which can be diagnosed, treated, and prevented. Because EHS is becoming a new insidious worldwide plague involving millions of people, we ask the World Health Organization (WHO) to include EHS as a neurologic disorder in the international classification of diseases.



1. Introduction

The term electromagnetic hypersensitivity or electrohypersensitivity (EHS) was first proposed in 1991 by William Rea to identify the clinical condition of patients reporting health effects while being exposed to an electromagnetic field (EMF) [1]. This term was then used in 1997 in a report provided by a European group of experts for the European Commission to clinically describe this unusual pathology, which may imply EMF exposure [2].

In 2002, Santini et al. in France reported similar symptomatic intolerance in users of digital cellular phones and among people living near wireless communication base stations [3,4]. In 2004, because of the seemingly worldwide prevalence increase in EHS, the World Health Organization (WHO) organized an international scientific workshop in Prague to define and characterize EHS. Although not acknowledging EHS as being caused by EMF exposure, the Prague working group clearly defined EHS as "a phenomenon where individuals experience adverse health effects while using or

Int. J. Mol. Sci. 2020, 21, 1915; doi:10.3390/ijms21061915

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NEWSWEEK MAGAZINE

Science Says Wi-Fi Allergies Are Fake—But People Are Still Sick

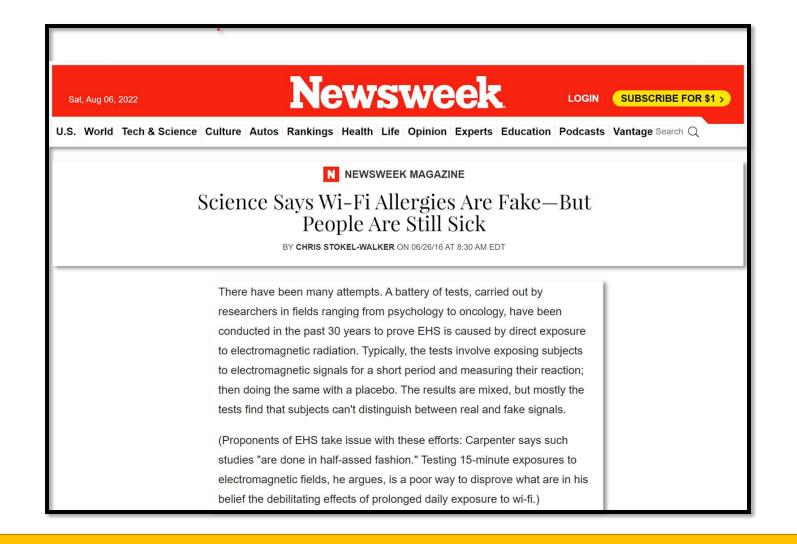
BY CHRIS STOKEL-WALKER ON 06/26/16 AT 8:30 AM EDT

Scientific Dismissals

For the better part of a decade, two diametrically opposed sides—one that claims there is no scientific link between exposure to Wi-Fi signals and illness and another that says people suffer daily because of it—have battled on websites, in newspapers and in scientific journals. James Rubin of the Institute of Psychiatry at King's College London, doesn't dispute that EHS sufferers are ill. "They have physical symptoms; the quality of life they have can be appalling sometimes; they're in desperate need of help," he says. But his surveys of the science led him to believe exposure to electromagnetic rays is not to blame.

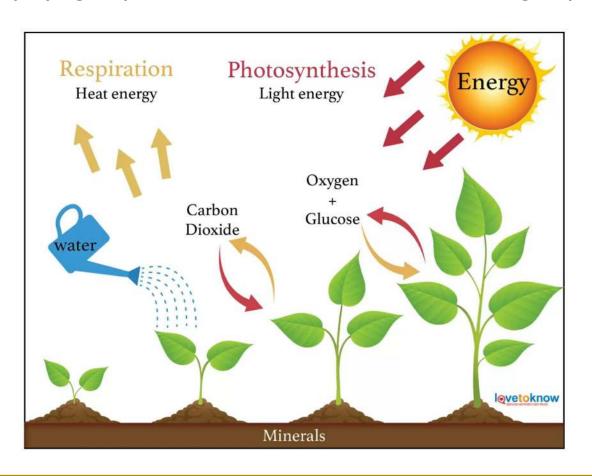
Others, including some professionals, disagree. "Ten years ago, I thought this was hokum," says Dr. David Carpenter, director of the Institute for Health and the Environment at the University of Albany in New York. "People have symptoms they want to blame on something, so they come to electromagnetic fields as the source." But that changed with the sheer number of people who came calling at his door, claiming their lives had been irreparably changed by electromagnetic fields. He's now switched sides: He has a sympathetic ear and is banging the drum for those affected. EHS is real, Carpenter says, and it's a problem. "The question in my mind is: How does one—in a rigorous scientific fashion—go about getting information that would be convincing to a skeptical scientific community?"



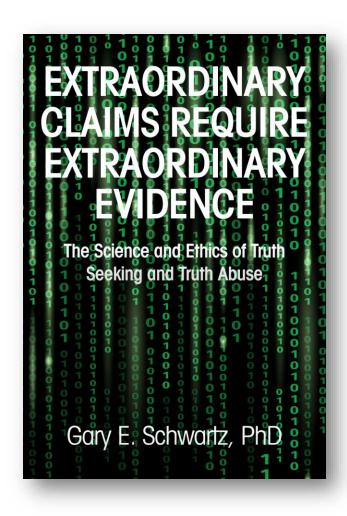




The lesson of employing "Optimal Conditions" Methods for making "Optimal Discoveries."







Extraordinary evidence requires extraordinary (optimal) methods.



vs. 3-6-2016

Electromagnetic field reduction restores health of electro-sensitive people¹

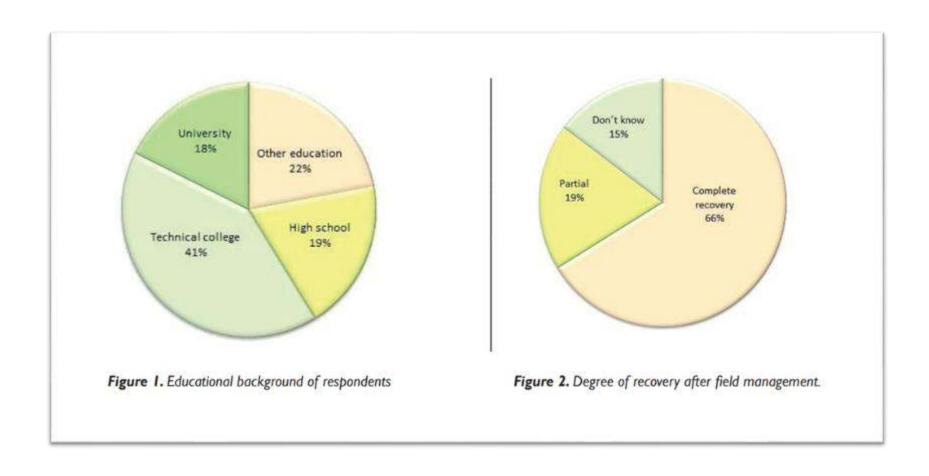
Hugo Schooneveld, Joop van Bijnen, and Patrick van Zuilen Electrohypersensitivity (EHS) Foundation, The Netherlands²

Abstract

Electromagnetically sensitized people may develop symptoms and health problems, when exposed to certain types of electromagnetic fields (EMF), known as electrical hypersensitivity (EHS). Over time, the effects may become stronger if such exposure continues. The Dutch EHS Foundation is committed to finding ways to understand these phenomena and to doing something about it. This study reports the results of a research questionnaire distributed among EHS people before and after that they had taken measures to reduce their exposure to EME Information requested included

This paper covers a pilot experiment meant to demonstrate that there are ways in which electrosensitives can help themselves. The solution is relatively simple: (1) the identification of the disturbing EMF that causes the allergic-type hypersensitivity reaction, and (2) the reduction of exposure to that trigger. A number of people who have asked for advice and help from the Dutch EHS Foundation have been approached questionnaires. If they were interested in participating in a program of guided EMF reduction, or when they had recently done so, their findings were recorded as to which symptoms they experienced: the EMF reduction techniques







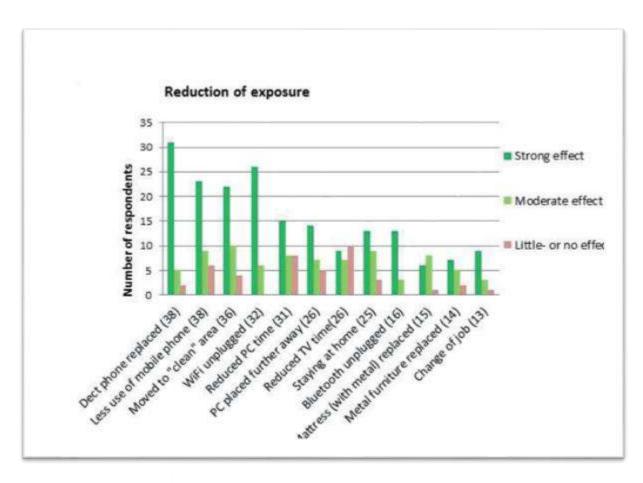


Figure 3. Number of people reporting relief after removal or specific household equipment.



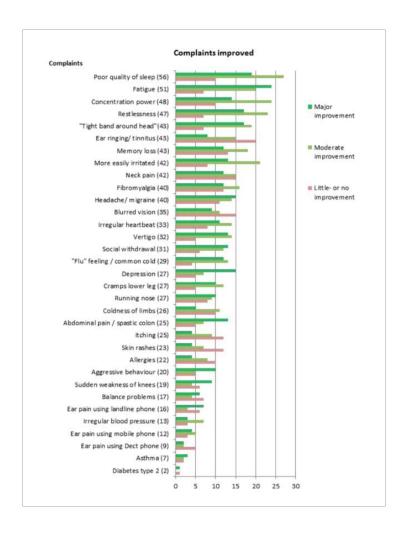


Figure 7. Ranking the 33 most-reported EHS symptoms based on their relative occurrence. Bar colours indicate the effectiveness of EMF reduction, whatever their nature. Between brackets, the number of persons reporting that particular symptom. The more frequent occurring symptoms benefit most from EMF reduction. On the basis of this distribution the condition of EHS can be decided upon when at least 9 out of the top-20 symptoms are reported. (see text for details).





What are the inherent limitations of drawing conclusions from this exemplary Phase I study on EMF sensitivity and EMF radiation:

- **Phase I** studies enable us to conclude that "something is happening." However, Phase I studies do not enable us to conclude with certainty "what is happening."
- Therefore, although we can conclude that certain symptoms (e.g. poor quality of sleep, fatigue, and concentration power) are more frequent in people reporting EMF sensitivity, until we conduct follow up **Phase II** studies, we can't be certain that EMF radiation is the "cause" of these symptoms.
- Also, because the participants in this study were **not blind** to the EMF reduction techniques they tried in their homes, we can't be certain that their experienced improvements are due to what they tested.



Part III: What inspired the creation of the FLFE EMF mitigation program?

Follow the evidence where it leads and be prepared for surprises!

Once a week the FLFE team uses their tools (kinesiology) to measure the level of consciousness (LOC) of all the properties on the FLFE Property service.

In 2017 we discovered several properties where the LOC had lowered from the previous specified level to a lower level of consciousness.

At the same time, we heard from several FLFE customers who explained that they felt something had changed, that they didn't feel as good on the FLFE service as the had previously.

We spoke to all of these customers to explore what changes were happening in their environments.¹



Part III: What inspired the creation of the FLFE EMF mitigation program?

Follow the evidence where it leads, and be prepared for surprises ©

We learned that for each one there was a change that increased the electrical and/or magnetic fields (EMFs) near them.

We heard about nearby new cell towers, newly installed smart meter for remotely reading gas and electric meters and in some cases new home Wi-Fi routers that were stronger.

Clayten and Jeffrey discovered that these influences were lowering the LOC of these environments. FLFE's expertise is in consciousness fields and the measurement of them, so this is the lens with which they looked at the EMF influence. FLFE has a promise of maintaining a high-consciousness field of a certain level for FLFE subscribers, so those customers received the exploratory service until a solution was found.

More details of the solution are here: https://www.flfe.net/emf-harmonization/ 1



Part III: What inspired the creation of the FLFE EMF mitigation program?

Follow the evidence where it leads, and be prepared for surprises ©

Once a solution was found, Clayten and Jeffrey discussed with the FLFE community on webinars that a beta test to mitigate the consciousness-lowering effect of EMFs on the FLFE environment was in progress.

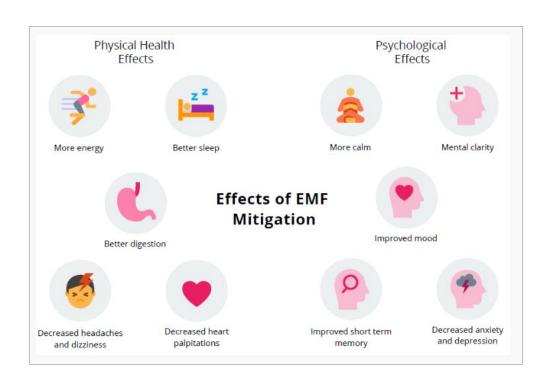
A number of self-identified EMF sensitives came forward spontaneously and asked to be on the beta test.

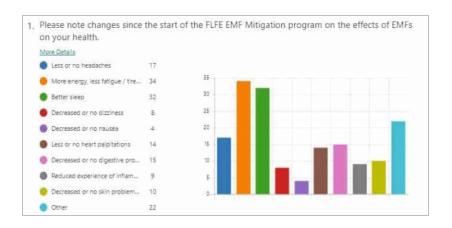
A before and after survey was conducted with this group. The "after" survey was 14-days.

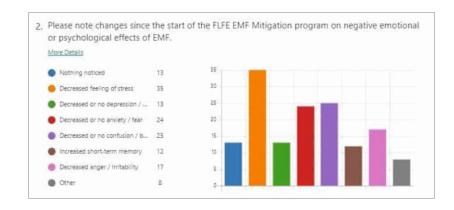
Experiencers experienced more energy, less fatigue, better sleep, a decreased feeling of stress, decreased anxiety and increased cognitive functioning (less brain fog).¹



Experiment 1 – Preliminary Phase I Experiment (n=56)

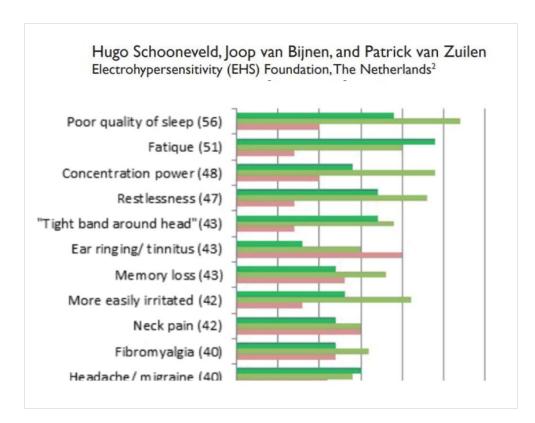


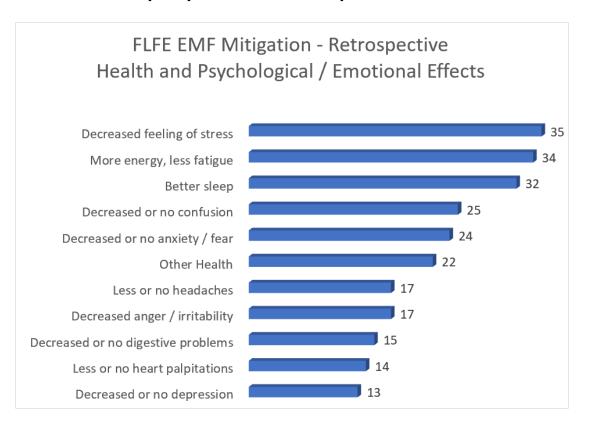






Follow the evidence where it leads and be prepared for surprises.







FLFE EMF Mitigation participant comments

I was living where there were high voltage power lines plus my router. I was experiencing symptoms at night. It felt like every cell in my body was vibrating at a really fast pace. I was experiencing fear, anxiety, minor depression, poor sleep.

From the very first night with the EMF mitigation program on my cabin, all symptoms went away. I had the best sleep. My body felt at peace. It was the first time in a few years that I felt zero symptoms. Truly a miracle for me.

I just spent the first few nights on the program in such peaceful bliss at how wonderful it was feeling to be in a healthy body again.



FLFE EMF Mitigation participant comments

I've noticed less headaches, decreased digestive issues, a sense of calm and peace, and the best sleep ever.

The biggest thing I've noticed is more restful sleep, and I've also had more energy to do things.



FLFE EMF Mitigation participant comments

Hello everyone at FLFE. The biggest change we have seen is sleep and rest.

Pat and I are 76 and 81 respectively and we usually have a nap each afternoon of 30-45 minutes. Since mitigation it has gone to 1.5 to 2 hours!!!:)

We also find we get through our daily chores with more energy and find it easier to relax afterward. Now, we don't anticipate sleeping 2 hours each afternoon forever - but maybe we are in a catch up phase??!!:):)

Life is good but it's even better on FLFE! Thanks so much to you all!



FLFE EMF Mitigation participant comments

The other night I was laying in bed and thought, something feels different, better. I wonder if they started that EMF Mitigation thing. In the morning, after a great nights sleep, I found the email saying it had started...

If I eat sugar, even a tiny drop in something, I still don't sleep...but otherwise I'd say my sleep is better, noticeably better!

I also feel like even as we're had some emotions flying around here once or twice, the whole family is a bit calmer. This could be my imagination, but I truly don't think so.

Also, whenever I tune in, I feel it, it feels like FLFE but calmer, toned down, or something...

Thank you for bringing this extra layer of protection to us...



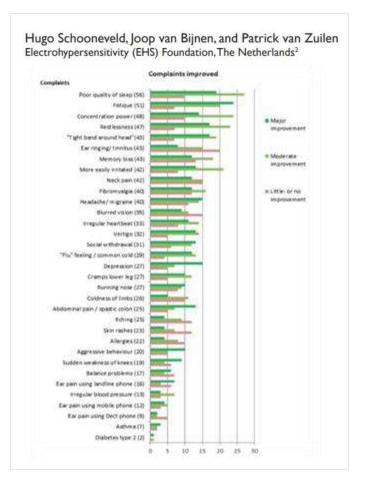
FLFE EMF Mitigation participant comments

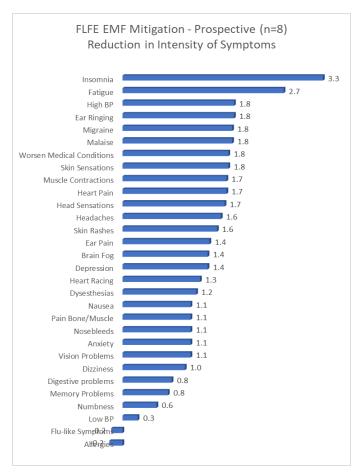
The best sleep in forever!! On the first night, I was shocked at the difference the program made.

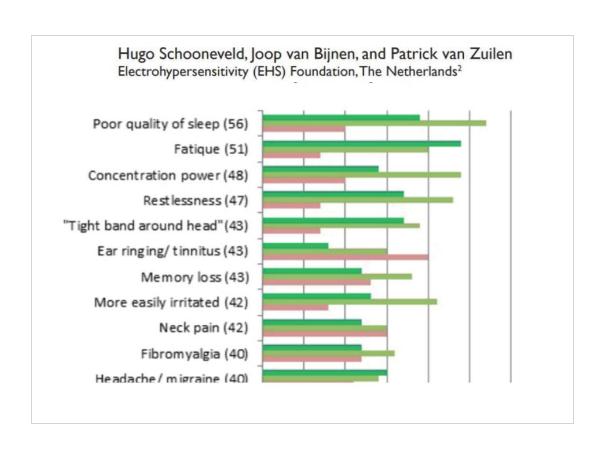
I wasn't the only one in my home who experienced deep sleep. Other family members had no idea about the program, but all felt the improvement. Maybe it's a side benefit of better sleep, but my home is so peaceful now.

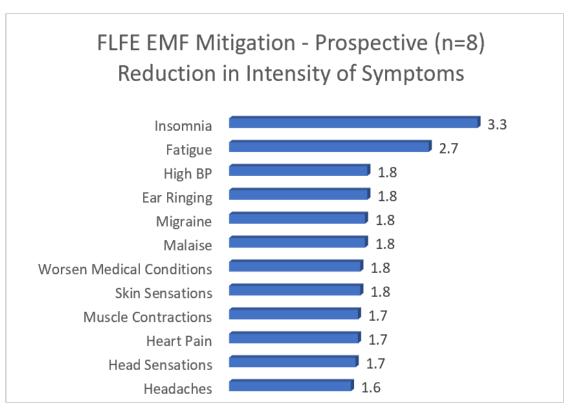
Our environment feels like a loving warm hug!



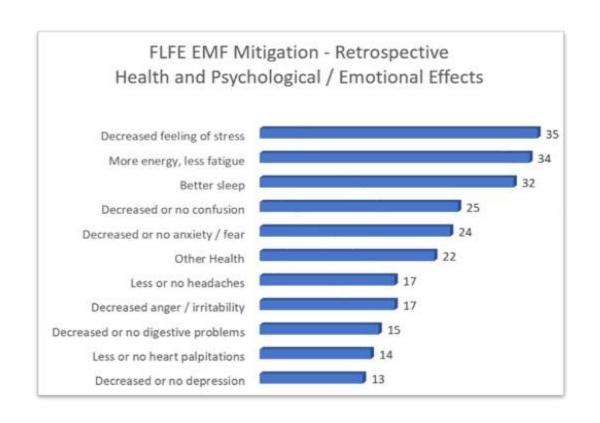


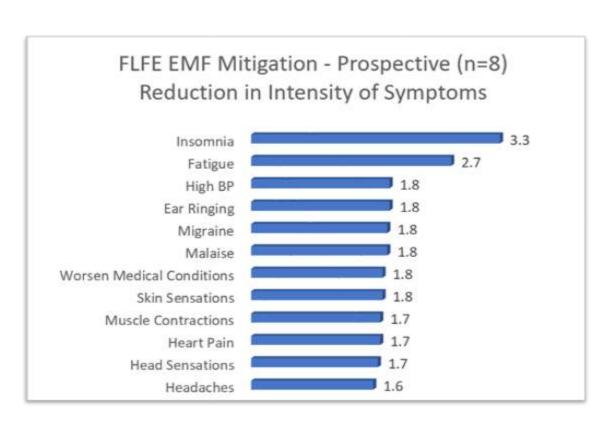




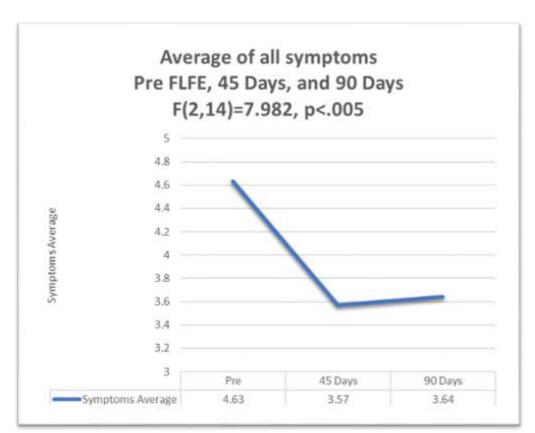


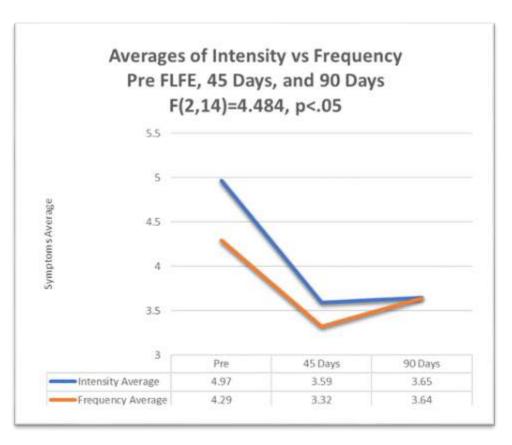




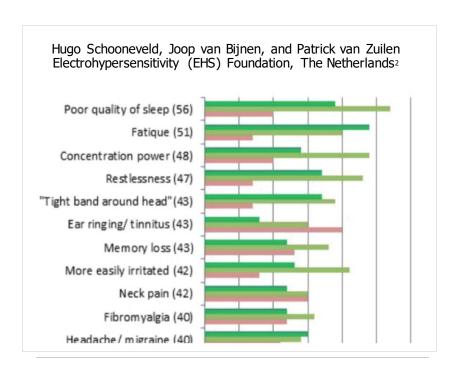


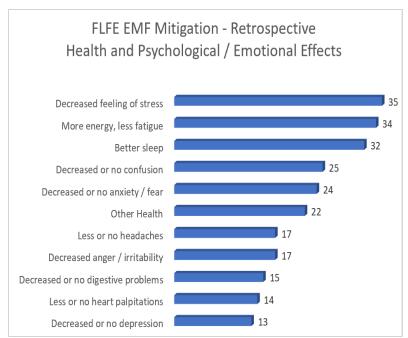


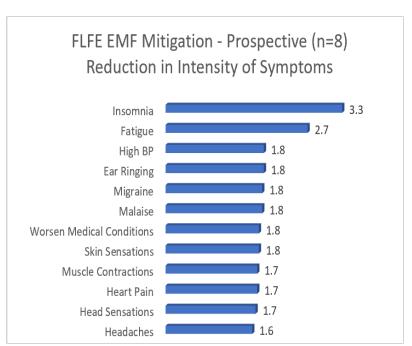












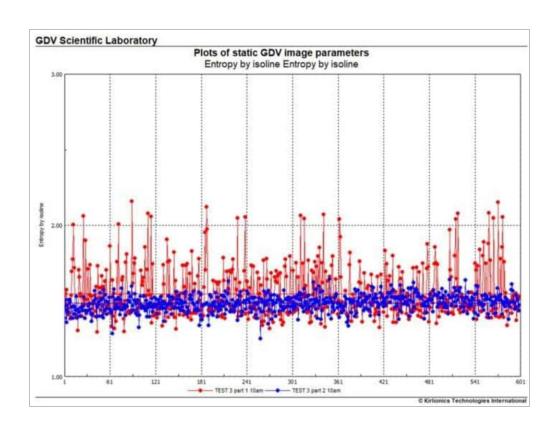


Summary

- 1. The findings from a **preliminary** <u>FLFE</u> Phase I EMF mitigation experiment where customers received an exploratory FLFE EMF mitigation service for 14 days revealed a **core** pattern of health improvements that replicated a <u>previously published</u> core pattern of health improvements reported in a Phase I experiment where the participants engaged in various EMF mitigation behaviors such as reducing EMF devices in their homes.
- 2. This core pattern of improvements featured increases in sleep and concentration along with reductions in fatigue and head symptoms (e.g., pain and tinnitus).
- 3. This core pattern of health improvements was replicated and extended in a **second FLFE Phase**I EMF mitigation experiment involving new volunteer participants over 90 days who were not FLFE customers.

Future Research

- Before embarking on more costly and time-consuming Phase II FLFE EMF mitigation experiments that will feature various controls and conditions (e.g. double blinding), it is valuable to perform a final large sample Phase I FLFE EMF mitigation experiment.
- 2. Future Phase II FLFE EMF mitigation experiments will investigate how these effects occur, including (a) possible biophysical, biochemical, cellular, and physiological mechanisms in the humans and other organisms (including animals and plants), and (b) possible effects on the actual electromagnetic fields themselves.



Watch Melissa Waterman share her GDV analysis of FLFE with Regina Meredith



Bell, I. R., Lewis, D. A., Brooks, A. J., Lewis, S. E., & **Schwartz, G. E.** (2003). Gas discharge visualization evaluation of ultramolecular doses of homeopathic medicines under blinded, controlled conditions. *Journal of Alternative and Complementary Medicine*, *9*(1), 25-38.

Biophysical and biophoton measurements of EMF radiation

Laboratory for Advances in Consciousness and Health
The University of Arizona









Inspiration from FLFE Subscribers

"Several years ago, I started having migraines that started as dizziness and painful sensitivity to artificial light (except incandescent and halogen light bulbs). I observed that even walking into certain buildings with dark sunglasses produced this dizzy feeling. After ruling out various medical explanations, I came to believe that I'm very sensitive to EMFs and tried to avoid them as much as possible, even changing careers. Unfortunately, EMFs are not entirely avoidable!

Last Autumn I used the 15-day introductory property service and was very pleased! But because I'm exposed to EMFs while away from home, I decided to purchase the mobile phone service. I am quite happy with it, especially because I need to keep my phone near my body at all times to use the CGM (continuous glucose monitor) for type 1 diabetes. I had been nervous about keeping my phone so close because of possible EMF and other wavelength exposure. I'd refused to start this diabetes management protocol until FLFE was available. My doctors and I are thrilled with my vastly improved health!

I bought a truly heavenly condominium at the beginning of the pandemic where I live among the treetops just minutes from family and from downtown; I'm determined to stay put for several decades. However, a new neighbor moved into the unit below mine and promptly hooked up his very strong Wi-Fi. I knew this because I started feeling the familiar dizzy, groggy, painful sensations, and the symptoms grew stronger each day.

Well, as Paule explained to me, the FLFE service is recalibrated each time the mobile phone is moved and therefore not as strong as it could be if it stayed still. I carry my phone from room to room all day long...

Within minutes of turning on the FLFE service for my property, I felt better! Over the next few days, I felt better at an accelerating rate and my sugar levels improved with the reduced stress!

It may be a coincidence but my hummingbird feeder hanging on my balcony, which was visited only rarely, soon became a central feature for a local flock of hummingbirds. Their dive-bombing of each other has become less frequent and more playful over these few weeks as well."

