



**NTEF**<sup>®</sup>  
 National Toxic Encephalopathy Foundation  
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December 28, 2025

John J Whyte, MD, MPH  
 11446 Aidan Run Ct.  
 Great Falls, VA 22066

Re: AMA Fragrance 'Initiative'

Dear Dr. Whyte,-

By way of introduction, I am the President of the National Toxic Encephalopathy Foundation, a 501c3 medical/enviro organization, which deals with the endogenous chemicals in our environment primarily upon the brain. Also, the person that your staff seems to think that our 30 years of research, advocacy and recommendations is substandard to your 'light bulb' moment that fragrances are now a 'health' concern.

While I think your medical student proved he can do 'generalized' research, his proposal is highly deficient and basically will generate more harm that good.

Everything identified in your 11 pages of meeting summary has already been done. Back in 2000, Congress presented a bill on this HR5238, copy enclosed. I have spent thirty years addressing these issues along with being harmed by the formalin in the wet lab, so, I will put my knowledge up against the AMA's 'enlightenment' and their now late entry into this complicated arena. Better address EHS and 5G also!

Your first mistake is assuming that 'fragrances' are the primary problem, they are a minute portion in this barrier/accommodation issue.

Your summary mentioned 'medical schools', let me educate you on that. Here in Las Vegas I reached out to the Kirk Kerkorian School of Medicine to address this, I have attached the Chief of Staff for the Dean's Office response. So one can extrapolate that all medical schools have the same parameters, so, its up to the AMA to generate CME's on this issue.

Given the fact, it took the AMA over forty years to stop ascribing to those who presented these complaints as having a 'psychological' problem. Is there a 'psychological' component, yes, its from the ad nauseum treatment by allopaths and their ongoing refusal to address their real issues.

The dismissive attitude from your members has created a major distrust and disdain that prevents those who are injured to seek medical treatment. I have stopped going to the ER to meet with those who needed to go and they needed a patient advocate who could handle the physicians.

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This attitude seems to permeated your entire association, as your staff and others think that unless there is the infamous 'minor deity' after a person's name, they aren't 'qualified' to 'teach/educate' or even speak to the board. This ongoing arrogance and holier than thou 'medical' attitude needs to stop immediately and treat the patient correctly not 'guesstimate' protocols.

You must be thinking 'who is this person. who has the audacity to contact me at my home and make such accusations'? I am an advocate, I have taken on Warren Buffet's energy company and won, and the thorn in the side of allopaths until they stop harming those who are environmentally challenged, learn how to dx, tx and stop with the ongoing Rx'ing. Our full disclosure FDA petition on Angel Perfume by Thierry Mugler, has generated a lot of calls from allopaths over the reverse engineering we did and the health implications tied into anti-coagulants and Coumarin. Did your 'medical student know about that petition? NOPE! Do you know the association? I highly doubt it.

An FYI, so far only Social Security and Workers Comp recognize chemical sensitivity as a disability, there has NEVER been a win in civil litigation. because of Daubert v Merrill Dow. Your student's use of the dx of 'MCS' is just more reaffirmation that you are threading on very thin ice, not even those who advocate for accommodations, expert witnesses will associate with that term.

Not to neglect the fact that your members do not have the necessary alternatives to treat this demographic, if you want to learn, you can contact the NTEF for training, we have pointed out enough in this letter. These views are primarily mine

We addressed these concerns in a press release entitled '*NTEF challenges the Lack of Effective Implementation of the AMA's Fragrance Free Initiative*' and I dedicated a website for patient resource on who is accommodating and who is refusing  
<http://AMAattemptsfragrancefree.us/>

Yes, it was my intention to get you so annoyed that you will actually climb off of that ivory tower and learn how to implement your 'revelation' the right way and completely, not cherry-picking'.

UNLESS YOU ADDRESS EVERYTHING FULLY---PRIMUM NON NOCERE---WILL EMBRACE YOUR FELLOW ALLOPATH'S STATEMENT:

'...Every weapon in the physician's armamentarium is double-edged; every cure has a potential harm. As physicians we hide this fact in statistical nomenclature in phrases like "percentage of side effects" and other obtuse phrases that try to hide the fact that physicians are not immune to harming. We, as today's physicians need to allow our patients to understand why and how it is no longer possible to "first, do no harm."' -KENNETH LECROY, M.D.-Am Fam Physician.  
2001;64(12):1942\_

NATIONAL TOXIC ENCEPHALOPATHY FOUNDATION

/s/ ANGEL DEFAZIO, BSAT, BCNHP  
Angel DeFazio, BSAT, BCNHP