



Dear Sir/Madam,

Aviation employees who can no longer perform their work due to complaints for which no official label can be attached. Local residents and employees of airports, but also of large factories, who become (partially) incapacitated for work because they literally become ill from the air. I can't imagine anyone who wants that, not the victims, but certainly not their employers either. That is why I started a PhD study at Manchester Metropolitan University (MMU) in October 2022, under the supervision of supervisors Dr. David Megson and Dr. Llywd Orton.

Although the health complaints of people staying in and around large factories and airports are increasingly in the news, their complaints do not seem to be taken very seriously. While these disease symptoms due to toxicity caused by substances such as PFAS, Chromium6, pesticides and insecticides, are becoming an increasing social problem.

The research I have started focuses specifically on neurotoxicity inside and outside aviation and its consequences on vital organs such as the brain, heart, lungs, liver and muscles.

My interest in this was aroused when I was approached in 2016 by doctor/captain Michel Mulder, who was no longer working at KLM at that time. He had to stop working in 2009 due to persistent health problems resulting from the so-called Aerotoxic Syndrome (ATS). The fact that he and other people on board, cockpit, cabin, frequent flyers and on the platforms can no longer practice their profession is dramatic for them personally, even worse is that these groups have or develop a strong predisposition to conditions such as Parkinson's, MS, ALS, dementia, heart disease, breast cancer and other cancers.

Many publications have been made about ATS over the past 30 years, in particular about the substances that may cause (partial) disability. Yet, until now, no research has been done into the mechanistic effect of these toxic substances at the cellular level. When the functioning of the cell is disrupted, this can, for example, lead to chronic fatigue, a complaint that almost every ATS patient mentions. I am now conducting research into this on a large scale. I receive support from Amsterdam UMC, Radboud UMC, Jena University (DL), Clinica Creu Blanca (SP), trade unions in Norway and Sweden and of course the MMU (UK), where my PhD studies are being done.

When we know what happens at the cell level, and why one person gets ATS and another seems to be less sensitive to it, we can also work on a solution.

I understand very well that not every employer can immediately ensure that his employees or those living near his company are no longer exposed to (possibly) pathogenic substances. But I am also sure that every employer prefers to see his employees healthy. This is not only good for the employees themselves, but also for the company. It is important that we work together on a solution, so that we can act preventively in the future.

That is why I would like to ask you to help me make the progress of this research possible. Due to the large-scale nature of the research, financial resources play a crucial role. It would be fantastic if you could support the research in this regard. Any donation, large or small, is very welcome (see bank details below).

You will also help me by publicizing this problem and/or the research. This subject deserves more social awareness and is still too much ignored by airlines, among others. Talk about it with your colleagues or loved ones, or share my message via the various social media channels, especially via [LinkedIn](#). That is much appreciated.

It goes without saying that I am always willing to answer questions and provide more information. I would be happy to discuss this with you.

Sincerely,

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