

Thank you Chair,

The Endocrine Society is the world's largest and oldest professional society dedicated to the understanding of hormone systems and clinical care of those with endocrine diseases including a global membership of physicians and scientists from over 120 countries. Our expertise has defined much of what we know about the endocrine system: what hormones are, what they do and how they do it. Our members have advanced our understanding of how chemicals in plastics can interfere with the function of endocrine systems and act as endocrine-disrupting chemicals or EDCs and cause human and ecological health impacts.

Decades of research have explained the connections between plastic additives, including bisphenols, phthalates, and UV-stabilizers; to obesity, diabetes, infertility, and cancer. The science is well-established; however, scientists with discipline-specific expertise should participate in discussions regarding obligations, voluntary approaches, monitoring and evaluation. To reduce exposure to EDCs, the Endocrine Society can provide technical expertise to ensure that the treaty is designed to deliver health and environmental goals.

To evaluate the public health impact of the treaty, we support biomonitoring studies that can evaluate the body burden of plastic pollution, with special consideration for disproportionately impacted countries and communities. We recognize the urgent need to reduce plastic production, particularly for consumer goods. We especially emphasize the science confirming that recycling plastic products that contain EDCs has been shown to concentrate harmful additives, maintaining and possibly increasing hazardous exposures. We therefore urge the INC to include milestones for reducing plastic and hazardous chemical production as part of a comprehensive approach to reduce, reuse, and recycle plastic.

We are encouraged by this important opportunity to address the interconnected goals of reducing pollution and improving health, but we should not overlook that a meaningful reduction in plastic production and use will achieve substantial economic benefits through a reduction in diseases and associated costs. Bisphenols and phthalates have been conservatively estimated to cost the European Union at least € 26 billion per year due to increased disease burden. Moreover, prefluoroalkyl substances (PFAS) have contributed to nearly 500,000 cases of low birth weight in low- to middle-income countries, predominantly in Asian countries. We therefore urge participants in the INC to seek ambitious solutions that recognize the urgency of this issue.

Thank you for considering our comments, we look forward to working with the Committee.

Muchas gracias Señor Presidente por la oportunidad de dar esta intervención. Thank you Chair.

We appreciate the opportunity to give an intervention on measures to improve the effectiveness of implementation and enhance scientific and technical cooperation and coordination.

First, we reiterate that the plastics treaty is a global public health treaty. We observe with profound alarm statements suggesting the absence of health effects of chemicals in plastics, contradicting consensus statements by WHO and others. We remind delegates of the strong scientific consensus that chemicals in plastics cause noncommunicable diseases. The effects are concentrated in the most vulnerable, including children, pregnant women, and workers with unique exposures. Implementation efforts should expand on existing national and international efforts, including restrictions, that address the hazards of chemicals in plastic. For example, endocrine-disrupting chemicals (EDCs) used in plastic materials are treated with particular emphasis in EU laws and regulatory policies. We also highlight the ICCM4 resolution stating that continued actions on EDCs by all stakeholders are required to achieve the goals of SAICM.

We note that several delegates have raised the issue of regrettable substitutions. The instrument should therefore treat bisphenols, phthalates, and PFAS as classes of hazardous chemicals using existing scientific information. As a scientific and medical professional society we urge that scientists be engaged in all contact groups and treaty processes to provide and facilitate technical assistance on this issue.

We also emphasize that global obligations will be required to even begin to deal with plastic pollution and the associated negative consequences for human and environmental health. Plastic pollution is a transboundary issue and these pollutants continue to leach harmful EDCs throughout their lifecycle. We note that the European Food Safety Agency, based on peer-reviewed scientific evidence, has proposed to lower the tolerable daily intake of BPA by 100,000 fold, because these chemicals are hazardous at extremely low and environmentally-relevant levels and impact reproductive health, among other harms.

Finally, we would like to point out that, as a global community of scientists and medical professionals, we are here to support all of you, member states, so you can make informed decisions on these important matters. The COVID-19 pandemic has reminded us of the crucial need to follow the science. We urge the INC to follow the human health and environmental science on chemicals used in plastic, and engage with scientists as with other international public health crises throughout this process.

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Statement delivered by Marina Fernandez, PhD, during the plenary session of the first Intergovernmental Negotiating Committee (INC) to develop an international legally binding instrument on plastic pollution, including in the marine environment.

December 02, 2022

Punta del Este, Uruguay

Thank you Chair,

The Endocrine Society appreciates the opportunity to provide comments on the engagement of stakeholders via a multistakeholder forum. While we understand that member states are seeking opportunities to involve diverse voices in the discussions surrounding the INC, it is imperative that stakeholders be allowed to participate directly in negotiations and meetings involving technical details of the instrument.

We mentioned in our previous interventions the critical role that scientific stakeholders must play in the negotiations to ensure that the instrument achieves meaningful public health benefits. We are concerned that a large multistakeholder forum in parallel to, or immediately adjacent to, the negotiation sessions could impede meaningful engagement of stakeholders with technical expertise with member states. Our experience with the SAICM process has informed our perspective on how such parallel dialogues could create barriers to effective engagement in negotiations.

We urge the INC to adopt modalities that enable our Society and our expert scientists, clinicians, and other health professionals to provide their meaningful expertise and support in an efficient manner to member states throughout the INC process, for example via regional or national meetings with expert scientists from among our global membership during the intersessional period.

Thank you for your consideration and appreciation of our perspective.