August 29, 2018

To: Mr. Rameshwar Adhikari, Chair, Stockholm Convention PFOA Working Group
Ms. Katinka van der Jagt, Drafter, Stockholm Convention PFOA Working Group

Copy: Ms. Estefania Moreira, Chair of the Stockholm Convention POPs Review Committee
Ms. Kei Ohno-Woodall, BRS Secretariat, UN Environment
Ms. Abiola Olanipekun, BRS Secretariat, UN Environment

Re: PFOA exemptions for healthcare uses

Dear Mr. Adhikari and Ms. Van der Jagt,

We are writing to express concerns surrounding proposed exemptions for PFOA in medical products which will be discussed at the upcoming face to face meeting of the Stockholm Convention POPs Review Committee (POPRC) from September 17 – 21, 2018. The draft addendum to the PFOA Risk Management Evaluation (UNEP/POPS/POPRC.14/3) notes several possible healthcare-related uses that could be candidates for recommended exemptions including membranes intended for use in medical textiles, medical devices, implantable medical devices, and the photo imaging sector. This is a matter of great concern to us due to our focus on greening the healthcare industry. Four major US companies[1] with 54 hospitals and USD$4 billion in annual purchasing power formed Greenhealth Exchange in 2016 to move healthcare towards greener products that protect human health and the environment. Since then, Greenhealth Exchange has grown to nine healthcare systems that represent over 100 hospitals.

One of our primary concerns about PFOA is its links to human health harms documented in the US and noted by the POPRC in its PFOA Risk Profile. These include links between PFOA exposure and diagnosed high cholesterol, ulcerative colitis, thyroid disease, testicular cancer, kidney cancer and pregnancy-induced hypertension. US health professionals are extremely concerned about the health consequences of drinking water contamination from this substance. In June 2018, the US Agency for Toxic Substances and Disease Registry (ATSDR) proposed a minimal risk level of $3x10^{-6}$ mg/kg/day for PFOA– a value significantly lower than the current US EPA advisory level. The ATSDR proposal would translate into a drinking water limit of 11 ppt for PFOA – far lower and more protective than the current US EPA advisory level of 70 ppt for PFOA and PFOS combined. Mr. Patrick Breysse, Director of the US Centers for Disease Control, National Center for Environmental Health, described PFOA and other PFAS chemicals as, "one

[1] Dignity Health, Dartmouth-Hitchock Health Care, Gundersen Health System, and Partners HealthCare joined with Health Care Without Harm and Practice Greenhealth to form Greenhealth Exchange

of most seminal public health challenges for the next decades." Taken together, the data indicate that PFOA is not the type of substance that should be present in medical products or hospitals more broadly.

A few brief comments about the proposed exemptions for PFOA uses in healthcare that will be discussed at the upcoming POPRC meeting:

Membranes intended for use in medical textiles

Alternatives for PFOA use in medical textiles are available on the market and in wide use. We support the statement in the draft addendum to the PFOA Risk Management Evaluation that, "no exemption is needed."

Medical devices and implantable medical devices

In our experience, medical devices, including implantable devices, without PFOA that have passed all regulatory requirements are available and in wide use. Granting an exemption to allow PFOA for these uses would penalize those companies that have made the effort to produce products without PFOA. We do not find the argument that the EU exempts PFOA use in medical products until 2032 and has an unlimited exemption for implantable medical devices to be a convincing reason to move the world in a less-protective direction. Given the harmful impacts of PFOA in manufacturing communities, we find also find arguments about "small amounts" of use to be unconvincing. Finally, we think it is extremely disingenuous to imply that patient safety will be jeopardized if an exemption is not granted. Our products have passed all regulatory approvals and provide patient safety. The draft addendum to the PFOA Risk Management Evaluation clearly states that PFOA-free PTFE products have been developed and are on the market. In our view, no exemption should be recommended for these uses.

Photo imaging

The rapid replacement of analogue printing with digital techniques, including in developing and transition countries, obviates the need for this exemption. We support the statement in the draft addendum to the PFOA Risk Management Evaluation that, "no exemptions for photographic coatings applied to paper and printing plates should be considered necessary."

The healthcare industry has a special responsibility to set a positive example for other corporate entities when it comes to the safety of the products it uses. The documented human health harms of PFOA combined with the existence of alternatives leads us to request that the POPRC recommend PFOA for global elimination under Annex A of the treaty and not include any recommendations for exemptions for use in membranes intended for use in medical textiles, medical devices, implantable medical devices, or the photo imaging sector.

We would appreciate it if this letter could be shared with the Committee. Thank you for your consideration.

Sincerely,

John Strong, President
Greenhealth Exchange