

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 404
(A-08)

Introduced by: American College of Preventive Medicine

Subject: Modern Chemicals Policies

Referred to: Reference Committee D
(Robert T. M. Phillips, MD, PhD, Chair)

1 Whereas, The chemical industry is an important industry in the US, and its contributions to
2 health and human development are widely recognized, and the global scale of industrial chemical
3 production is immense and is expected to grow four-fold by 2050; and
4

5 Whereas, Many chemicals that are useful to society are also known to be hazardous to human
6 biology, particularly in utero and in developing children; and
7

8 Whereas, The California Medical Association and the Washington State Medical Association
9 recently called upon our AMA to request that the US implement a modern, comprehensive
10 chemicals policy in line with current scientific knowledge on human health, and requiring a full
11 evaluation of the health impacts of both newly developed and existing industrial chemicals now;
12 and
13

14 Whereas, There are long-standing deficiencies in the federal regulation of industrial chemicals,
15 most notably in the Toxic Substances Control Act (TSCA), and the University of California
16 (UC) documented in a March 2006 report to the California Legislature that TSCA's deficiencies
17 have produced several gaps. These include a US chemical Data Gap (defined in the report as
18 insufficient information on the toxicity of the vast majority of chemicals in commercial
19 circulation), Safety Gap (insurance that the production and use of goods does not come at the
20 expense of public and environmental health), and Technology Gap (concerns that the vast
21 majority of chemical products are manufactured in the US using technologies developed 40 to 50
22 years ago); and
23

24 Whereas, The UC report, prepared by a multidisciplinary group of experts, illustrates that these
25 gaps have prevented public agencies from effectively assessing the hazards of the great majority
26 of chemicals in commercial circulation or controlling those of greatest concern, and that these
27 Gaps are adversely affecting public, occupational, and environmental health, as well as business,
28 industry, and government; and
29

30 Whereas, On a global level "fundamental changes are needed in the way that societies manage
31 chemicals." Environment Ministers, Health Ministers and other delegates from over 100
32 governments together with representatives of civil society and the private sector declared in
33 Dubai, February 6, 2006, that "the environment worldwide continues to suffer from air, water
34 and land contamination, impairing the health and welfare of millions." They adopted the

1 Strategic Approach to International Chemicals Management (SAICM), a global plan of action
2 whose stated goal is: "to achieve the sound management of chemicals throughout their life-cycle
3 so that, by 2020, chemicals are used and produced in ways that lead to the minimization of
4 significant adverse effects on human health and the environment"; therefore be it

5
6 RESOLVED, That our American Medical Association encourage the training of medical
7 students about the health effects of toxic exposures on patients (New HOD Policy); and be it
8 further

9
10 RESOLVED, That our AMA call upon Congress to craft and implement a modern,
11 comprehensive chemicals policy, to (1) Close the Data Gap by improving the efficiency of the
12 chemicals market by implementing measures that improve the flow of information regarding
13 toxicity from chemical producers to businesses, consumers, workers, and government agencies;
14 (2) Close the Safety Gap by reducing the commercial circulation of the most hazardous
15 chemicals by identifying those of greatest concern and implementing measures that motivate
16 businesses to reduce their usage and improve the safety of their usage of these substances
17 through toxics use reduction and other relevant strategies; and (3) Close the Technology Gap by
18 introducing a range of other incentives to encourage businesses to invest in green chemistry
19 innovation, and by supporting "green" chemistry research and education (Directive to Take
20 Action); and be it further

21
22 RESOLVED: That our AMA carry this resolution to the World Medical Association urging
23 involvement in the Strategic Approach to International Chemicals Management (SAICM)
24 process leading to the sound management of chemicals throughout their life-cycle so that, by
25 2020, chemicals are used and produced in ways that minimize adverse effects on human health
26 and the environment. (Directive to Take Action)

Fiscal Note: Implement accordingly at estimated staff cost of \$4,365.

Received: 05/07/08

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 418
(A-08)

Introduced by: Illinois Delegation
Subject: A Modern Chemicals Policy
Referred to: Reference Committee D
(Robert T. M. Phillips, MD, PhD, Chair)

1 Whereas, A California Medical Association Resolution 712-07 reads:

2
3 *RESOLVED: That the CMA calls upon the State of California and United States*
4 *to implement a modern, comprehensive chemicals policy in line with current*
5 *scientific knowledge on human health, and which requires a full evaluation of*
6 *the health impacts of both newly developed and existing industrial chemicals*
7 *now in use;*

8
9 *RESOLVED: That this matter be referred for national action (AMA); and*

10
11 Whereas, In 2007, a Washington State Medical Association resolution encouraged safer
12 chemicals policies and regulatory reform of industrial chemicals to protect and improve human
13 life, as follows:

14
15 *RESOLVED, that the WSMA supports Washington State legislative efforts to*
16 *protect the public, particularly children, from harmful chemicals in consumer*
17 *products, to reduce the burden of toxic exposure and improve public health for*
18 *Washington's citizens; and*

19
20 Whereas, The Illinois State Medical Society has several policies related to the chemical health
21 hazards, including 1) the need to reduce and eventually eliminate mercury use in health care
22 facilities, 2) the design and construction of environmentally friendly hospital facilities by
23 eliminating the use of toxic paints, adhesives, carpeting, and other hazardous materials, 3)
24 opposition to new or expansion of existing hazardous waste landfills over aquifers; and 4)
25 development of national environmental contaminant bio-monitoring programs to track harmful
26 chemicals and toxic agents; and

27
28 Whereas, The global scale of industrial chemical production is immense and is expected to grow
29 four-fold by 2050, and the chemical industry is an important industry in the United States, and its
30 contributions to health and human development are widely recognized; and

31
32 Whereas, Many chemicals that are useful to society are also known to be hazardous to human
33 biology, particularly in utero and in developing children; and

34

1 Whereas, There are long-standing deficiencies in the federal regulation of industrial chemicals,
2 most notably in the Toxic Substances Control Act (TSCA); and, the University of California
3 (UC) documented in a March 2006 report to the California Legislature that TSCA's deficiencies
4 have produced a chemical Data Gap, Safety Gap, and Technology Gap in the United States; and
5

6 Whereas, The UC report, prepared by a multidisciplinary group of experts, illustrates that these
7 gaps have prevented public agencies from effectively assessing the hazards of the great majority
8 of chemicals in commercial circulation or controlling those of greatest concern, and that these
9 Gaps are adversely affecting public, occupational, and environmental health, as well as business,
10 industry, and government; and
11

12 Whereas, On a global level fundamental changes are needed in the way that societies manage
13 chemicals; and
14

15 Whereas, Environment ministers, health ministers and other delegates from over 100
16 governments, together with representatives of civil society and the private sector, declared in
17 Dubai, February 6, 2006, that “the environment worldwide continues to suffer from air, water
18 and land contamination, impairing the health and welfare of millions”; and
19

20 Whereas, The Dubai group adopted the Strategic Approach to International Chemicals
21 Management (SAICM), a global plan of action whose stated goal is: “to achieve the sound
22 management of chemicals throughout their life-cycle so that, by 2020, chemicals are used and
23 produced in ways that lead to the minimization of significant adverse effects on human health
24 and the environment”; therefore be it
25

26 **RESOLVED**, That our American Medical Association gather all stakeholders to craft and
27 develop a modern, comprehensive national chemicals policy. (Directive to Take Action)
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29 Fiscal Note: Estimated cost of \$29,500 to convene a group of approximately 20 stakeholders to
30 develop report.
31

32 Received: 04/30/08

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 413
(A-08)

Introduced by: California Delegation
Subject: Modern Chemicals Policy
Referred to: Reference Committee D
(Robert T. M. Phillips, MD, PhD, Chair)

1 Whereas, The state, national, and global scale of industrial chemical production is immense and
2 is expected to grow four-fold by 2050, and the chemical industry is an important industry with
3 wide contributions to health and human development; and
4

5 Whereas, Ever-expanding research confirms that many chemicals that are useful to society are
6 also known to be hazardous to human biology and health, particularly in utero and in developing
7 children; and
8

9 Whereas, For new and existing medications, the US Food and Drug Administration has long
10 required pre-approval evaluation of safety as well as efficacy, and many industrial chemicals
11 with known impacts on human biology are present in human bodies at levels similar to active
12 doses of medications; and
13

14 Whereas, Numerous other nations including Canada and the European Union are adopting more
15 proactive health-oriented chemical policies, based upon scientific knowledge, assessment, and
16 accepted public health principles; and
17

18 Whereas, There are long-standing deficiencies in the federal regulation of industrial chemicals,
19 most notably in the Toxic Substances Control Act (TSCA), as confirmed by the National
20 Academy of Sciences and others, and the University of California documented in a 2006 report
21 to the California Legislature that TSCA's deficiencies are important and can be remedied; and
22

23 Whereas, These problems include the projected appearance of 600 new hazardous waste sites
24 each month in the US over the next 25 years; the appearance of hundreds of industrial chemicals
25 in human tissues and fluids, including those of infants; and the development of chronic diseases
26 caused by chemical exposures on the job among 23,000 California workers each year; and
27

28 Whereas, The American Public Health Association's (APHA) leadership has recently endorsed a
29 policy titled "Calling on the U.S. Congress to Restructure the Toxic Substances Control Act and
30 Implement a Modern, Comprehensive Chemicals Policy," to be considered for adoption at the
31 annual APHA meeting in November; therefore be it
32

33 **RESOLVED**, That our American Medical Association call upon the United States government to
34 implement a national modern, comprehensive chemicals policy in line with current scientific

1 knowledge on human health, and which requires a full evaluation of the health impacts of both
2 newly developed and existing industrial chemicals now in use. (Directive to Take Action)

3
4 Fiscal Note: Implement accordingly at estimated staff cost of \$4,580.
5 Received: 04/18/08

6 7 **RELEVANT AMA POLICY**

8 9 **D-135.997 Research into the Environmental Contributors to Disease**

10 Our AMA will (1) advocate for greater public and private funding for research into the
11 environmental causes of disease, and urge the National Academy of Sciences to undertake an
12 authoritative analysis of environmental causes of disease; and (2) ask the steering committee of
13 the Medicine and Public Health Initiative Coalition to consider environmental contributors to
14 disease as a priority public health issue. (Res. 402, A-03)

15 16 **H-55.990 Cancer Risk of Pesticides in Agricultural Workers**

17 The AMA: (1) urges the EPA and other responsible state and federal regulatory agencies to
18 continue their efforts at safeguarding human and environmental health, and especially the health
19 of agricultural workers who may be exposed to pesticides; (2) urges physicians to utilize the
20 resources of local or regional poison control centers or the National Pesticide Information Center
21 for the composition and toxicity of specific pesticides; and (3) through its scientific journals and
22 publications, supports alerting physicians to the potential hazards of agricultural pesticides.
23 (CSA Rep. B, I-87; Reaffirmed by CSA Rep. 4 - I-94; Reaffirmation I-96; Reaffirmed and
24 Modified: CSAPH Rep. 3, A-06)

25 26 **H-135.951 Environmental Chemical and Disease Tracking and Reduction**

27 Our AMA urges that the primary findings of the 2003 Centers for Disease Control and
28 Prevention report on chemicals be widely disseminated to physicians and patients for education
29 regarding the impact on public health; and urges the CDC to consider implementation of a
30 program similar to the Environmental Health Tracking Network. (Res. 414, A-03)

31 32 **H-135.954 Education and Prevention Programs Regarding Air Pollution Impact on Body 33 Organs and Systems**

34 The AMA will provide leadership and participate in a major air pollution education and
35 prevention program carried out by the health care community, in cooperation with environmental
36 organizations and business, to inform patients and the public of the negative health effects of
37 indoor and outdoor air pollution on the organs and systems of the body. (Res. 404, I-95;
38 Reaffirmed: CSA Rep. 8, A-05; Reaffirmation I-06)

39 40 **H-135.956 Human and Environmental Health Impacts of Chlorinated Chemicals**

41 The AMA: (1) encourages the Environmental Protection Agency to base its evaluations of the
42 potential public health and environmental risks posed by exposure to an individual chlorinated
43 organic compound, other industrial compound, or manufacturing process on reliable data specific
44 to that compound or process; (2) encourages the chemical industry to increase knowledge of the
45 environmental behavior, bioaccumulation potential, and toxicology of their products and by-
46 products; and (3) supports the implementation of risk reduction practices by the chemical and
47 manufacturing industries. (Sub. Res. 503, A-94; Reaffirmation I-98)

1 **H-135.997 Promoting Environmental Health**

2
3 Our AMA urges more active involvement in solving and preventing environmental health
4 problems. (Res. 55, I-69; Reaffirmed: CLRPD Rep. C, A-89; Reaffirmed: Sunset Report, A-00;
5 Reaffirmed in lieu of Res. 417, A-04)

6
AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 427
(A-08)

Introduced by: Washington Delegation

Subject: Encouraging Safer Chemicals Policies and Regulatory Reform of Industrial
Chemicals to Protect and Improve Human Health

Referred to: Reference Committee D
(Robert T. M. Phillips, MD, PhD, Chair)

1 Whereas, The US chemical industry designs, produces, and imports 42 billion pounds of
2 chemical substances per day with global production growing a projected four-fold by 2050^{i,ii};
3 and

4
5 Whereas, Many of these substances useful to society are also known to be hazardous to human
6 biology and ecological systems, with harmful chemical exposures posing the greatest threat to
7 children and women before and through reproductive age, impacting children's health,
8 development, behavior and learning, with exposures to neurotoxic chemicals in critical child
9 development periods linked to lifelong deficits in brain functionⁱⁱⁱ; and

10
11 Whereas, The federal Toxic Substances Control Act (TSCA) of 1976 (P.L. 94-469), broadly
12 intended to enable regulation of chemicals both before and after they enter commerce--has,
13 according to multiple independent analyses^{iv,v,vi,vii,viii,ix,x,xi}, fallen short of its objectives and
14 consequently not served as an effective vehicle for the public, industry, or government to *assess*
15 the hazards of chemicals in commerce or *control* those of greatest health concern; and

16
17 Whereas, These market conditions have failed to safeguard health, creating problems that include
18 the appearance of hundreds of industrial chemicals in human tissues and fluids including the cord
19 blood of infants^{xii,xiii}; the development of chronic diseases and premature death related to
20 chemical exposures in the workplace; and disproportionate risks due to chemical exposures
21 among members of minority, immigrant, and low-income communities^{xiv}; and

22
23 Whereas, AMA-stated policy "supports the implementation of risk reduction practices by the
24 chemical and manufacturing industries"^{xv}; therefore be it

25

1 RESOLVED, That our American Medical Association support restructuring of the Toxic
2 Substances Control Act to: 1) require chemical producers to provide comprehensive chemical
3 hazard information in forms that are appropriate for use by the public, workers, industry, and
4 government; 2) serve as a vehicle to help federal and state agencies to efficiently assess the
5 human and environmental hazards of chemicals in commercial use and reduce the use of those of
6 greatest concern; and 3) introduce complementary federal mechanisms to motivate investment,
7 education, and research in safer ('green') chemical technology. (Directive to Take Action)

Fiscal Note: Implement accordingly at estimated staff cost of \$4,365.

Received: 05/07/08

RELEVANT AMA POLICY

H-135.956 Human and Environmental Health Impacts of Chlorinated Chemicals

The AMA: (1) encourages the Environmental Protection Agency to base its evaluations of the potential public health and environmental risks posed by exposure to an individual chlorinated organic compound, other industrial compound, or manufacturing process on reliable data specific to that compound or process; (2) encourages the chemical industry to increase knowledge of the environmental behavior, bioaccumulation potential, and toxicology of their products and by-products; and (3) supports the implementation of risk reduction practices by the chemical and manufacturing industries. (Sub. Res. 503, A-94; Reaffirmation I-98)

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- i American Chemistry Council. Guide to the Business of Chemistry, p 37. Arlington, Virginia: American Chemistry Council, 2003.
- ii Organization for Economic Cooperation and Development (OECD). Environmental Outlook for the Chemicals Industry (<http://www.oecd.org/dataoecd/7/45/2375538.pdf>) (accessed February 8, 2006). p. 34-36, 2001
- iii Chemicals in the environment and developmental toxicity in children: A public health and policy perspective. *Environmental Health Perspective*, 108 (3), S443-S448; Goldman, L.R. and Koduru, S.H. (2000). (<http://ehp.niehs.nih.gov/members/2003/6115/6115.html>)
- iv National Academy of Sciences Commission on Life Sciences. Toxicology Testing: Strategies to Determine Needs and Priorities. Washington, D.C.:National Academy of Sciences Press, 1984.
- v United States General Accounting Office. Toxic Substances Control Act: Legislative Changes Could Make the Act More Effective (GAO/RCED-94-103). Washington, D.C.: U.S. Government Printing Office, 1994.
- vi Congress of the United States Office of Technology Assessment. Screening and Testing of Chemicals in Commerce: Background Paper. Washington, D.C.:U.S. Government Printing Office, 1995.
- vii Roe D, Pease W, Florini K, Silbergeld E. Toxic Ignorance: The Continuing Absence of Basic Health Testing for Top-Selling Chemicals in the United States (<http://www.environmentaldefense.org/pdf.cfm?ContentID=243&FileName=toxicignorance.pdf>) (accessed February 12, 2005). Washington, D.C.:Environmental Defense, 1997.
- viii U.S. Environmental Protection Agency. Chemical Hazard Data Availability Study (<http://www.epa.gov/opptintr/chemtest/hazchem.htm>) (accessed June 15, 2005). Washington, D.C.: U.S. Government Printing Office, 1998.
- ix Goldman L. Preventing pollution? U.S. toxic chemicals and pesticides policies and sustainable development. *Environmental Law Review* 32:11018-11041(2002).
- x United States Government Accountability Office. Chemical Regulation: Options Exist to Improve EPA's Ability to Assess Health Risks and Manage its Chemicals Review Program. Washington, D.C.: U.S. Government Printing Office, 2005.
- xi Wilson, Chia, Ehlers. Green Chemistry in California: A Framework for Leadership in Chemicals Policy and Innovation (http://coeh.berkeley.edu/news/06_wilson_policy.htm) (accessed March 15, 2007). Special Report to the California Legislature. University of California Policy Research Center, Office of the President (2006).
- xii Centers for Disease Control and Prevention. 2005. The Third National Report on Human Exposure to Environmental Chemicals. (<http://www.cdc.gov/exposurereport/>) (accessed May 11, 2007).
- xiii Houlihan J et al. 2005. Body Burden: The Pollution in Newborns. (www.ewg.org) (accessed May 11, 2007). Environmental Working Group: Washington, DC.
- xiv Wilson, Chia, Ehlers. Green Chemistry in California: A Framework for Leadership in Chemicals Policy and Innovation (http://coeh.berkeley.edu/news/06_wilson_policy.htm) (accessed March 15, 2007). Special Report to the California Legislature. University of California Policy Research Center, Office of the President (2006).
- xv American Medical Association Policy # H-135.956. Human and Environmental Health Impacts of Chlorinated Chemicals. (www.ama-assn.org/apps/pf_new/pf_online?f_n=resultLink&doc=policyfiles/HnE/H-

[135.956.HTM&s_t=chemicals&catg=AMA/HnE&catg=AMA/BnGnC&catg=AMA/DIR&&nth=1&&st_p=0&nth=2&](#) (accessed May 11, 2007). American Medical Association: Chicago, IL.