

Breast Cancer UK comments on draft restriction proposals for UK REACH

Breast Cancer UK welcomes the opportunity to comment on the proposed arrangements for restrictions under UK REACH at the end of the EU Transition period. These comments are written in response to a DEFRA meeting held on Monday 23rd November. Breast Cancer UK has not received any additional documentation beyond the presentation provided. Therefore, our feedback is solely based on the presentation provided by DEFRA.

1. Breast Cancer UK's position on UK REACH

Breast Cancer UK's position is that the UK should seek to maintain the closest possible relationship with the European Chemicals Agency (ECHA) as the best way to protect public health and the environment. Our analysis is that EU REACH has helped to protect public health, led to safer consumer products, healthier foods and a cleaner environment.

We acknowledge the Government's decision to establish a new UK Chemicals regulatory regime from 1st January 2021. However, we deeply regret the decision not to seek 'associate membership of the European Chemicals Agency (ECHA) as part of our future relationship with the EU. We remain very concerned that UK REACH will not sustain current levels of protection for public health and the environment, as a result of insufficient preparation, resources or expertise and no commitment to retain alignment with EU Chemical controls.

2. The Restriction Process

We welcome the UK's commitment to copy across and maintain existing EU restrictions. However, we are concerned that Post-2020, the decision to implement restrictions "appropriate to the UK", as expressed by DEFRA officials, will lead to harmful chemicals not being restricted in line with the EU in future and threaten current protectionsⁱ.

Without a commitment to mirror or keep pace with EU restrictions, UK chemicals controls will rapidly diverge and become weakerⁱⁱ. This will reduce protection of UK citizens from harmful chemicals linked to breast cancer and other illnessesⁱⁱⁱ. Whilst the EU has been traditionally slow in implementing restrictions, the proposed process may result in an equally slow process despite commitments from officials that UK REACH will act faster. We are concerned that the high burden of proof and insufficient use of scientific evidence from peer-reviewed literature may act as a disincentive to propose restrictions for chemicals.

We were informed that the UK will consider several economic factors in forming positions on restrictions. While we recognise the need for economic considerations, the fundamental goal of restrictions must be to prevent (or at worst, minimise) exposure of humans and the environment from unacceptable risks posed by chemicals, on the basis of the precautionary principle. We fear provisions granting the Secretary of State the power to amend the aims and objectives of UK REACH under the Environment Bill could lead to reduced protections.

On substances of very high concern, we seek urgent clarification on where the candidate list will sit. We support the Environmental Audit Committee's call, as part of its inquiry into 'Toxic Chemicals in Everyday Life'^{iv}, for the HSE to retain alignment with ECHA's candidate list. Deviation should only occur where the intention is to increase chemical safety standards by moving faster to restrict a substance of concern.

Under the UK REACH Framework, the DEFRA Secretary will make decisions with the consent of devolved administrations, on devolved matters. We believe devolved administrations should be permitted to propose restrictions within UK REACH in the same way EU Member States can propose restrictions within EU REACH. We further recommend that the new National Institute for Health Protection can propose restrictions on key chemicals of concern to protect the nation's health and support a non-toxic environment^v.

3. Arrangements for Stakeholder Engagement

We echo concerns raised at the meeting that the proposals contain ineffective mechanisms for stakeholder engagement. Under UK REACH, as we understand it, the Agency would simply have an obligation or ability to seek external expertise. Additionally, key levels of oversight are absent. That is those contained within EU REACH including the ECHA management board, Committee for Risk Assessment (RAC) and the Committee for Social-Economic Analysis (SEAC), which play an important role in authorisations and restrictions.

The creation of a new UK Chemicals Agency with minimal engagement and oversight by stakeholders are major concerns for Breast Cancer UK. These plans risk reduced public participation and a closed and opaque system which we believe will negatively impact the quality of decision making, by the Health & Safety Executive and the Secretary of State, on crucial matters such as substances of very high concern.

Without the necessary layers of oversight and transparency, the HSE and DEFRA will come under pressure to bow to vested interests, seek expert views from 'industry' players, which may result in biased and unbalanced decisions. The proposed provisions to provide input on restrictions through correspondence are completely inadequate. Thus, we welcome what we understand to be planned consideration for further arrangements for stakeholder engagement.

We recommend the HSE replicates the approach of the ECHA's management board, inviting representation from a broad range of experts, agencies, stakeholders and representatives from devolved administrations on restrictions. We also advocate for the creation of working groups with NGO and industry representation on issues such as Endocrine Disrupting Chemicals (EDCs). These arrangements will help ensure the Government delivers on its commitment not to undermine stakeholder engagement and public participation.

4. UK REACH Work Programme: Proposed Restrictions

Breast Cancer UK notes the publication of DEFRA restriction proposals for the first year of the UK REACH Work programme. We welcome the proposed restrictions on the following substances given their possible association with increased breast cancer risk:

- **Substances in Tattoo inks (Human Health – Consumer Exposure)^{vi}**
- **Formaldehyde and formaldehyde releasers (Human Health – Consumers)^{vii}**
- **D4, D5 & D6 in leave on and rinse off personal care process (Environment)^{viii}**
- **Microplastics (Environment)^{ix}**

During the meeting, it was noted that DEFRA and HSE would only be able to accommodate 13 restrictions proposals due to 'capacity'. This confirmed our major concern that the HSE lacks the capacity, resources and expertise necessary to adopt the functions of ECHA and become an effective chemicals regulator. We call on DEFRA to set out plans to boost funding for the HSE as a matter of urgency to ensure it has the necessary resources and capacity to restrict chemicals of concern in the coming months/years.

Finally, as part of the UK REACH work programme, Breast Cancer UK recommends DEFRA and HSE consider proposals for restrictions for the following substances:

Bisphenol substitutes

Bisphenol A (BPA) is used to manufacture polycarbonate plastics and epoxy resins. It is a reproductive toxicant and endocrine disrupting chemical and has been linked to an increased risk of breast cancer, infertility, cardiovascular disease and diabetes, and is routinely detected in human body fluids. Recently, we called on the European Commission to ban use of BPA in food contact materials^{xi}.

Due to stricter regulation of BPA, industry is replacing it with structurally similar bisphenols including BPAF, BPAP, BPB, BPF, BPP, BPS, and BPZ. These bisphenol substitutes are also oestrogenic, in some cases (e.g. BPAF, BPB, BPZ) more potent than BPA; these have also been detected in human body fluids. BCUK supports a group restriction for bisphenols.

Perfluoroalkyl substances (PFAS)

Per- and polyfluoroalkyl substances (PFAS) are a group of over 4,700 synthetic chemicals. They are used in a range of consumer products and fire-fighting foams, due to their ability to repel grease and water. These highly persistent chemicals are present in the blood of humans and wildlife, worldwide.

The most studied of the PFAS group have been linked to numerous health problems such as hormone disruption, cancers, infertility, and reproductive problems. BCUK calls for a group restriction for these harmful chemicals and a restriction on use in all food packaging^{xii}.

Organophosphate flame retardant and brominated flame retardants

Numerous brominated flame retardants (BFRs) have been banned (e.g. PBDEs and HBCDD) or are being considered or recommended for restriction by the EU (e.g. TBBPA, TBPH) due to toxicity, carcinogenicity, environmental persistence, ability to bioaccumulate and/or endocrine disruption. They have been linked to health problems such as cancers, thyroid disorders and neurological problems. Increasing evidence suggests organophosphate flame retardants (OPFRs), often used to replace legacy BFRs, show similar harmful effects. These organic flame retardants should be priority substances for restrictions^{xiii}.

5. Conclusion

The framework proposed for UK REACH will result in a weaker and less transparent system. The limited information provided is enough to make Breast Cancer UK extremely concerned. In particular, the creation of a new UK Chemicals Agency with minimal oversight, limited mechanisms for stakeholder engagement and a lack of provisions to mirror EU restrictions remain major flaws within UK REACH that urgently need to be addressed.

It remains in the UK's interests to maintain high public health and environmental standards by maintaining an ongoing relationship with EU REACH as part of the chemicals annex currently being negotiated. Breast Cancer UK welcomes the Government's commitment to retain a robust chemicals regime post-Brexit and stands ready to support DEFRA in any way possible to uphold public health and environmental standards on chemical safety.

For further information please contact Kit Bowerin, Public Affairs and Communications Officer, Breast Cancer UK at: kit.bowerin@breastcanceruk.org.uk or 07736 904620

ⁱ [Joint Letter](#) to George Eustice Secretary of State for Environment, Food and Rural Affairs on the Proposed UK Chemicals Regime, October 2020.

ⁱⁱ Breast Cancer UK [written submission](#) to the Environmental Audit Committee Inquiry on 'Toxic Chemicals in Everyday Life'

ⁱⁱⁱ Breast Cancer UK [background briefing](#) on Endocrine Disruptors (EDCs), September 2018

^{iv} Environmental Audit Committee (2019) '[Toxic Chemicals in Everyday Life](#)' 16th July 2019

^v [Joint Letter](#) to Matt Hancock Secretary of State for Health and Social Care calling for urgent action on harmful chemicals to protect the nation's health, November 2020

^{vi} [Joint Letter](#) to REACH Committee on discussions and vote on proposal for restrictions on tattoo inks and permanent make up, October 2019

^{vii} Breast Cancer UK [background briefing](#) on Cosmetics & Personal Hygiene Products, June, 2016

^{viii} [List](#) of cosmetics ingredients Breast Cancer UK recommend avoiding (includes cyclosiloxanes).

^{ix} Breast Cancer UK [comments](#) submitted to ECHA on their public consultation on restriction proposal for the place on the market of intentionally-added microplastics in consumer and professional products, May 2019;

^x Breast Cancer UK [comments](#) submitted to ECHA on their public consultation calling for evidence on the use of intentionally added microplastic particles in products of any kind place.

^{xi} Breast Cancer UK [background briefing](#) on BPA, October 2016

^{xii} [Joint Letter](#) to George Eustice Secretary of State for Environment, Food and Rural Affairs and others highlighting urgent need for PFAS regulation. February 2020. [Comments](#) on the consultation on the draft Opinion of the Committee for Socio-Economic Analysis on the Annex XV dossier proposing restrictions on Perfluorooctanoic acid (PFOA), its salts and PFOA-related substances. November 2015

^{xiii} [Comments](#) to ECHA on draft screening report on assessment of whether TCEP, TCPP and TDCP in articles should be restricted. February 2018