



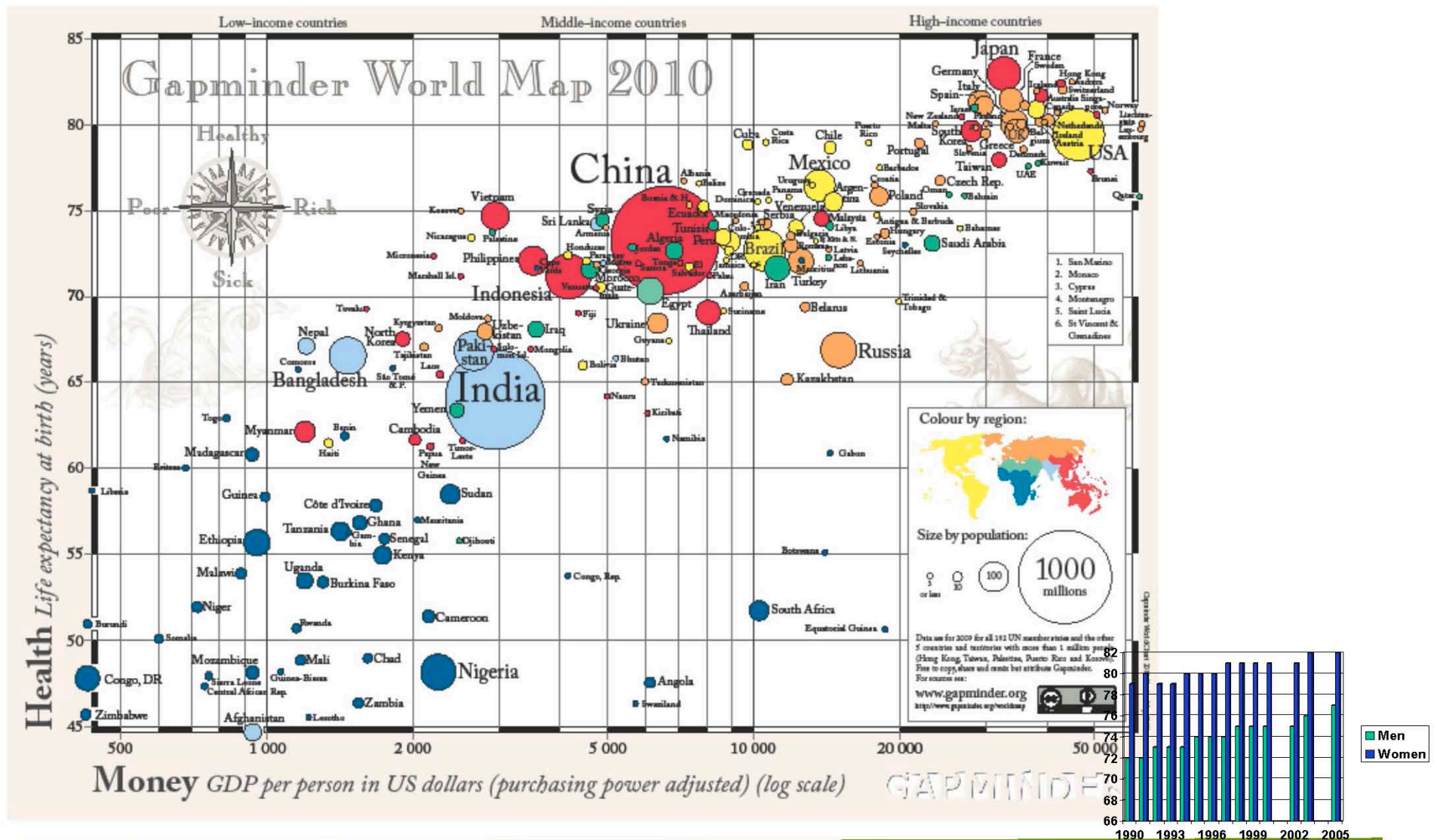
Environmental health risk assessment in the EU: State of the art and future directions

Andreas Gies

Federal Environment Agency
(Umweltbundesamt)

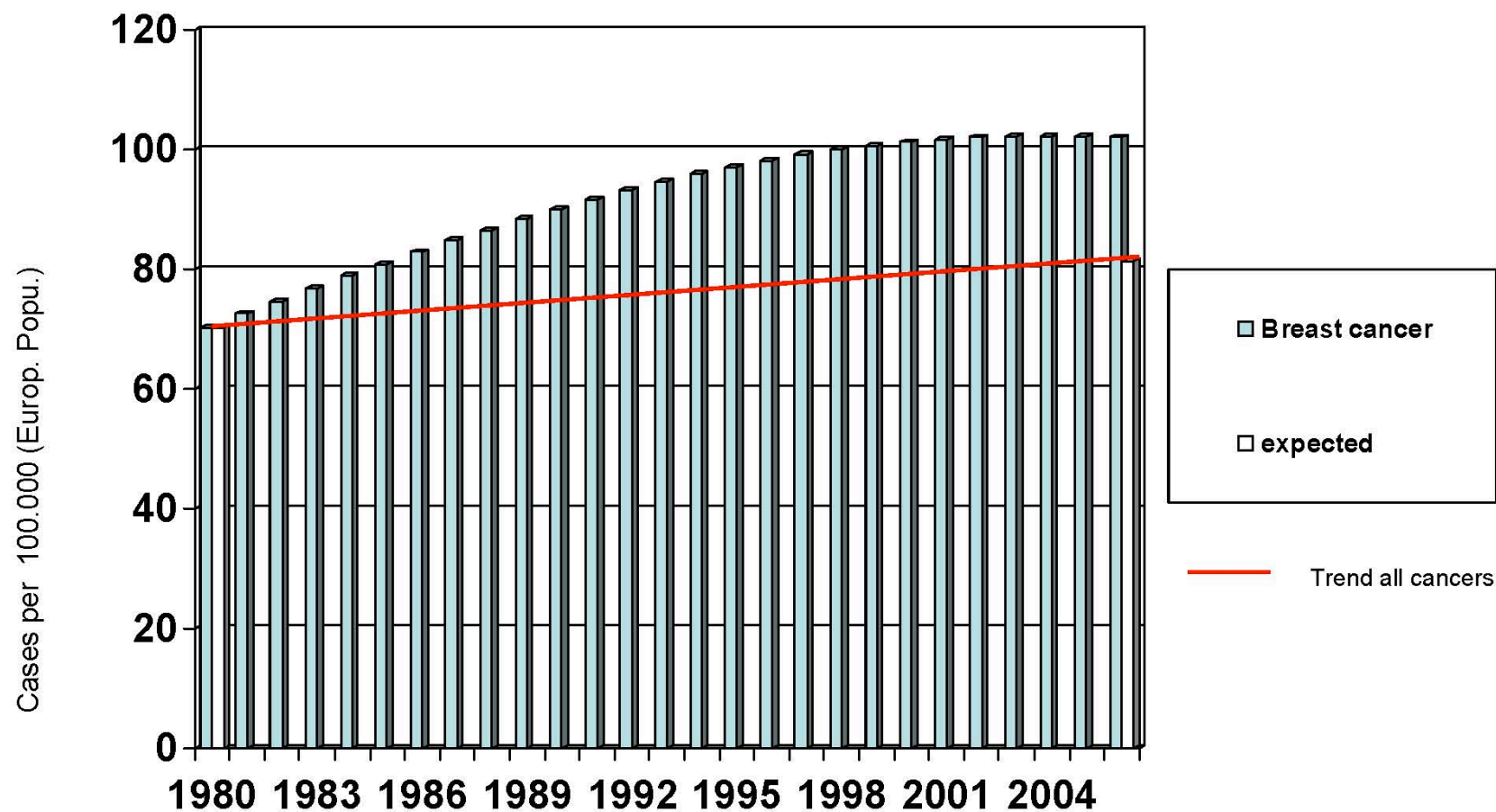
Dept. Environmental Hygiene





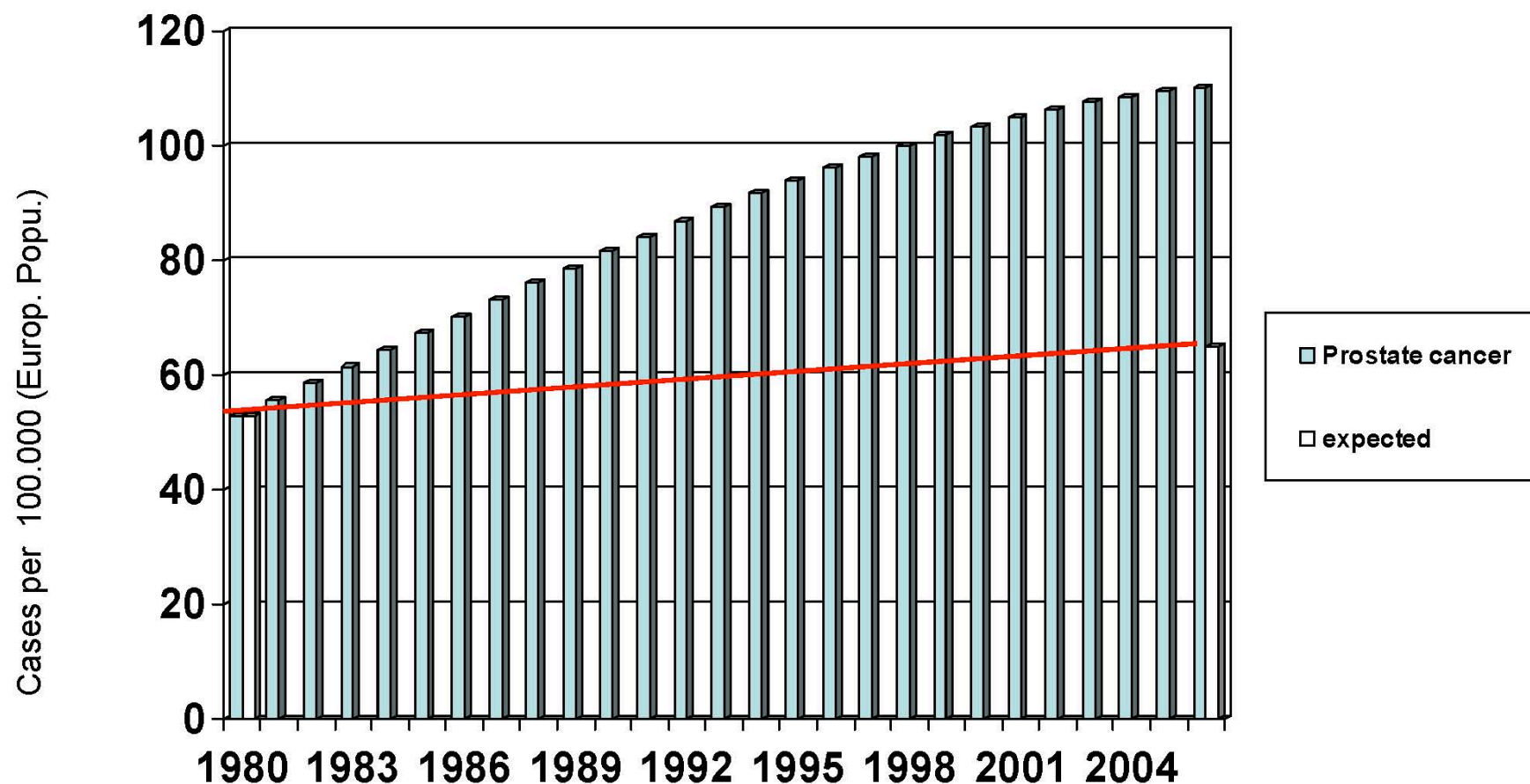
But...

Trend: Breast cancer in Germany 1980-2006



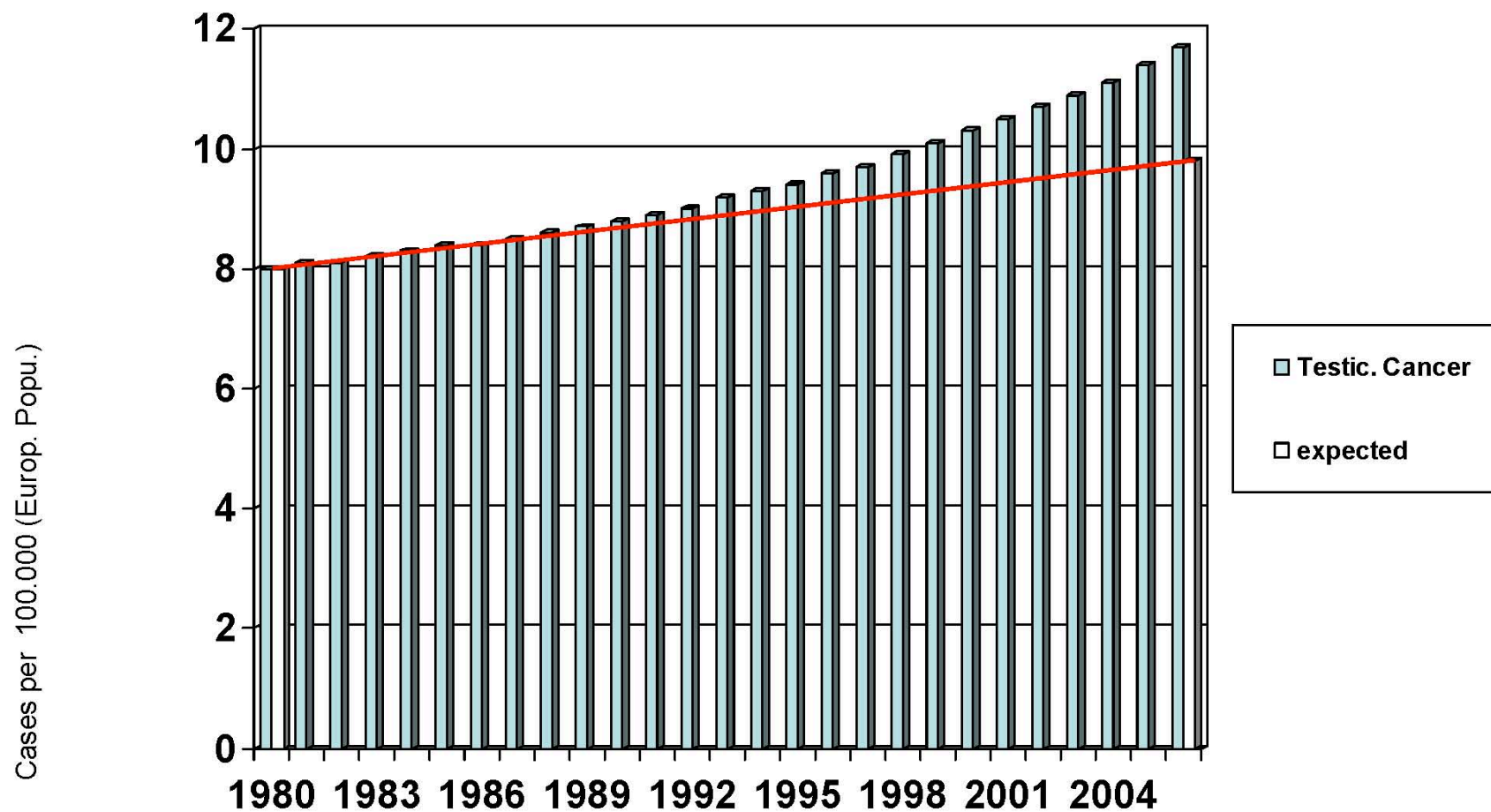
Quelle: Dachdokumentation Krebs, RKI 2010

Trend: prostate cancer in Germany 1980-2006



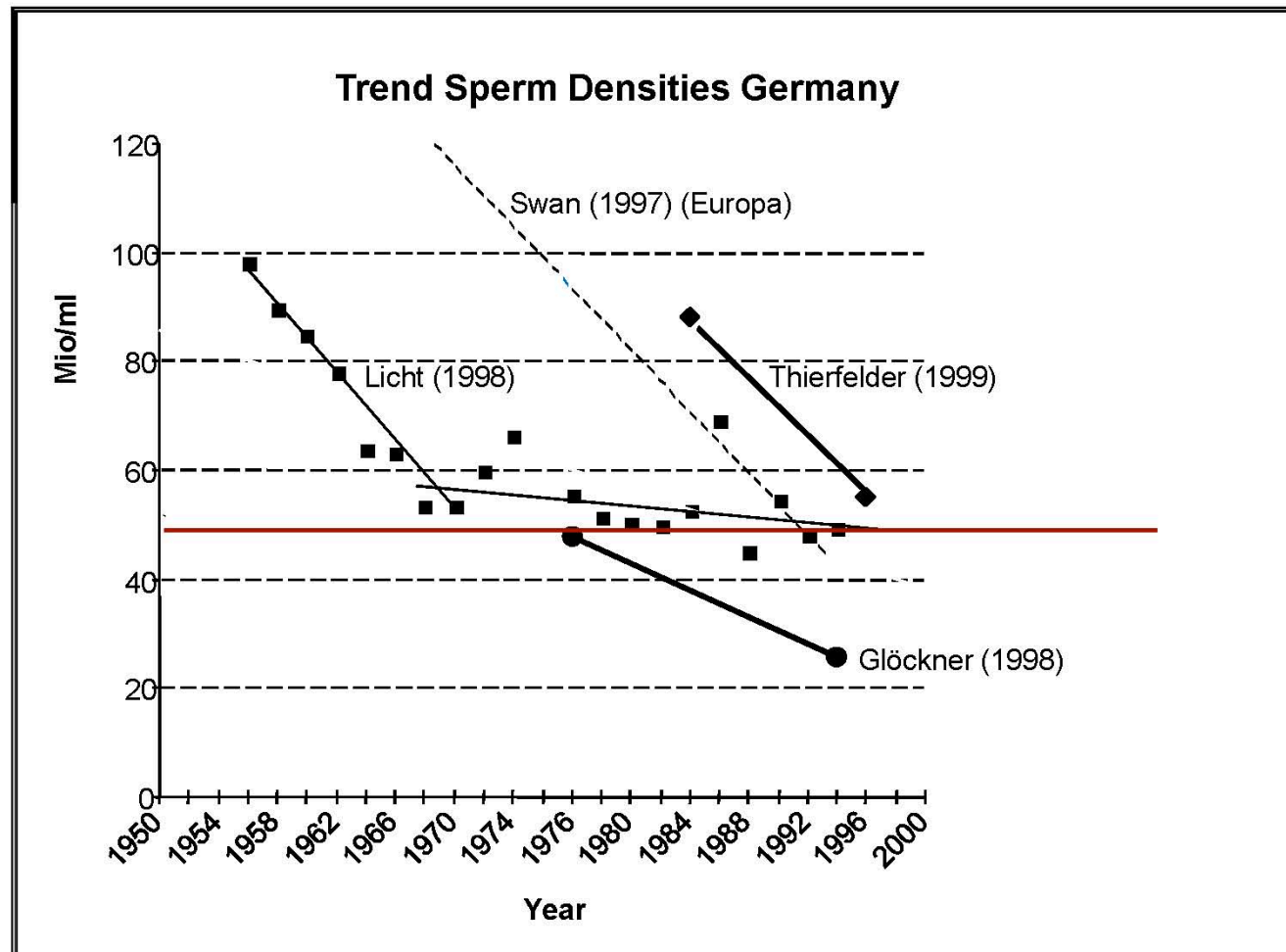
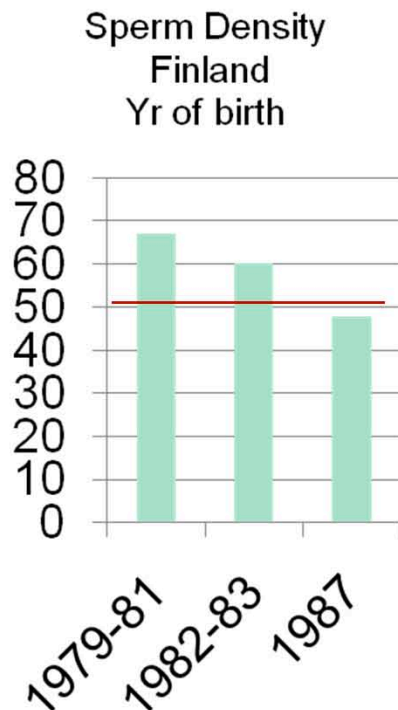
Source: Dachdokumentation Krebs, RKI 2010

Trend: testicular cancer in Germany 1980-2006



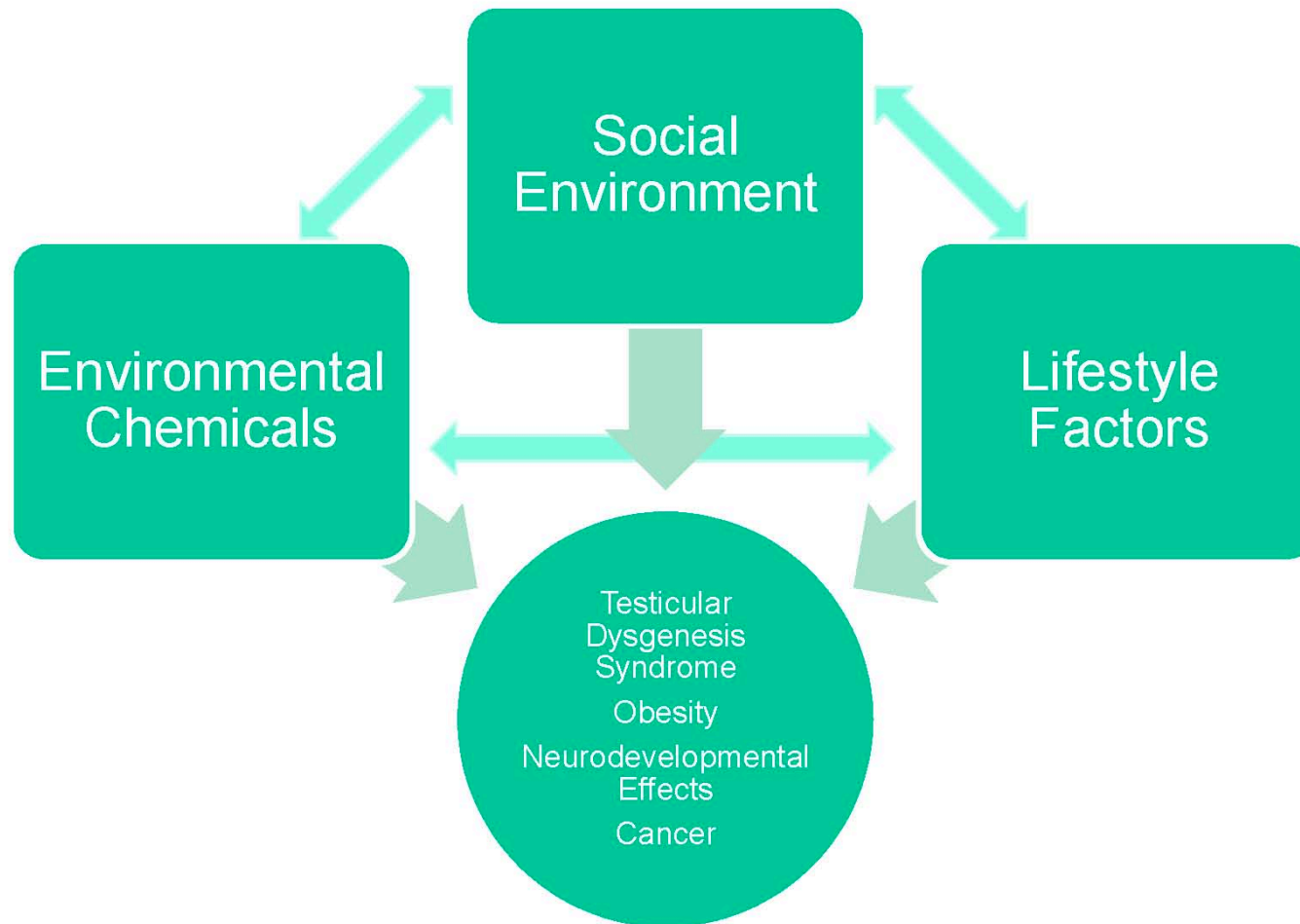
Source: Dachdokumentation Krebs, RKI 2010

Trend: Sperm Density in Germany

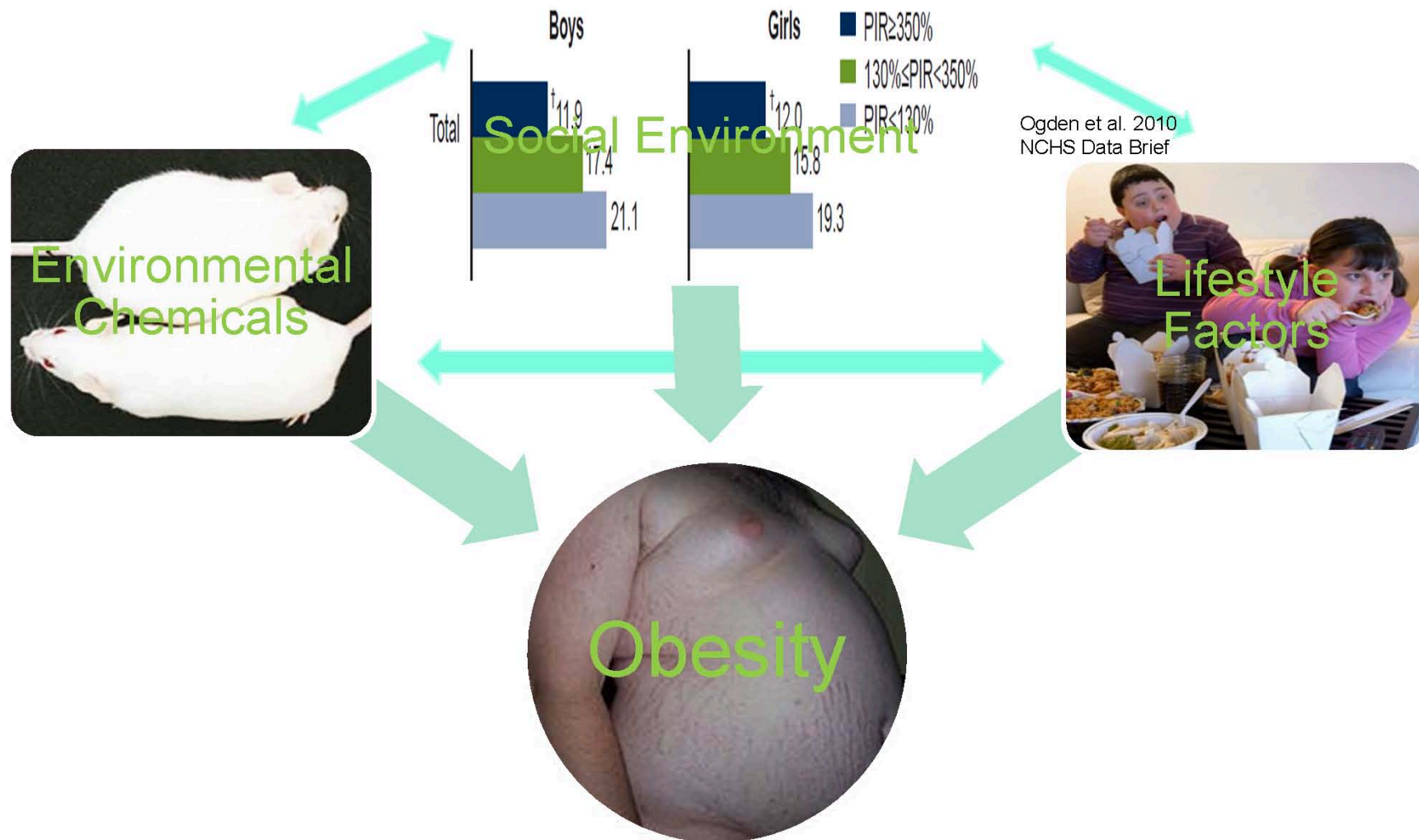


Source: N. Jørgensen et al.
Int. J. Androl. 2011

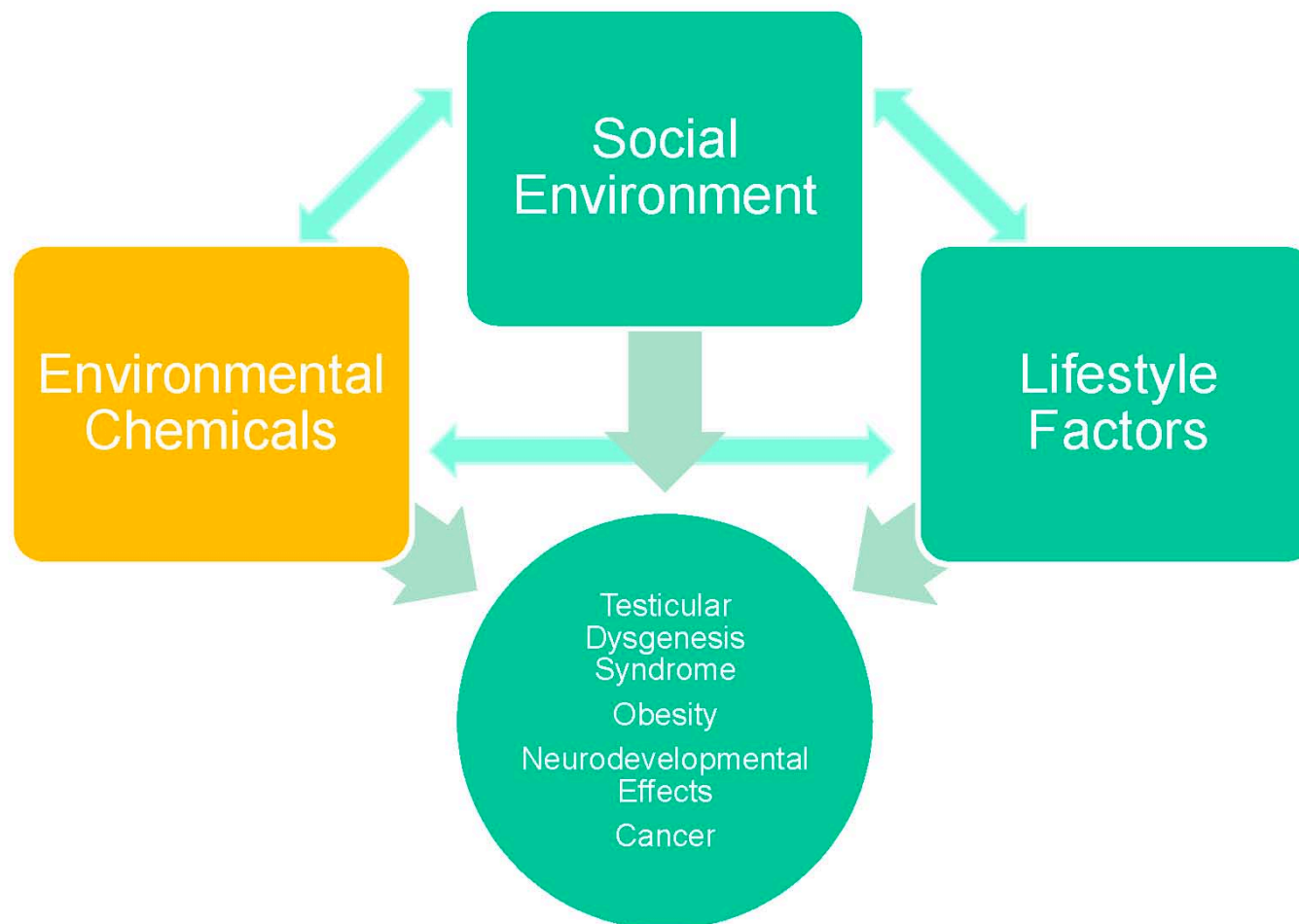
Real life is multifactorial



Real life is multifactorial



Real life is multifactorial



The European Environment & Health Action Plan



COMMISSION OF THE EUROPEAN COMMUNITIES

Brussels, 9 6 2004
COM(2004) 416 final

Volume I

COMMUNICATION FROM THE COMMISSION
TO THE COUNCIL, THE EUROPEAN PARLIAMENT,
THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE

"The European Environment & Health Action Plan 2004-2010"

{SEC(2004) 729}

EN

EN

European Environment & Health Action Plan 2004-2010

improving the information chain by developing integrated environment and health information to understand the links between sources of pollutants and health effects:

Action 1: Develop environmental health indicators;

Action 2: Develop integrated monitoring of the environment, including food, to allow the determination of relevant human exposure;

Action 3: Develop a coherent approach to biomonitoring in Europe;

Action 4: Enhance coordination and joint activities on environment and health;

filling the knowledge gap by strengthening research on environment and health and identifying emerging issues:

Action 5: Integrate and strengthen European environment and health research;

Action 6: Target research on diseases, disorders and exposures;

Action 7: Develop methodological systems to analyse interactions between environment and health;

Action 8: Ensure that potential hazards on environment and health are identified and addressed;

reviewing policies and improving communication by developing awareness raising, risk communication, training and education to give citizens the information they need to make better health choices, and to make sure that professionals in each field are alert to environment and health interactions:

Action 9: Develop public health activities and networking on environmental health determinants through the public health programme;

Action 10: Promote training of professionals and improve organisational capacity in environment and health by reviewing and adjusting risk reduction policy;

Action 11: Coordinate ongoing risk reduction measures and focus on the priority diseases;

Action 12: Improve indoor air quality;

Action 13: Follow developments regarding electromagnetic fields.

Second European Environment & Health Action Plan



COUNCIL OF
THE EUROPEAN UNION



Improving environmental policy instruments - Council conclusions -

*3061st ENVIRONMENT Council meeting
Brussels, 20 December 2010*

The Council adopted the following conclusions:

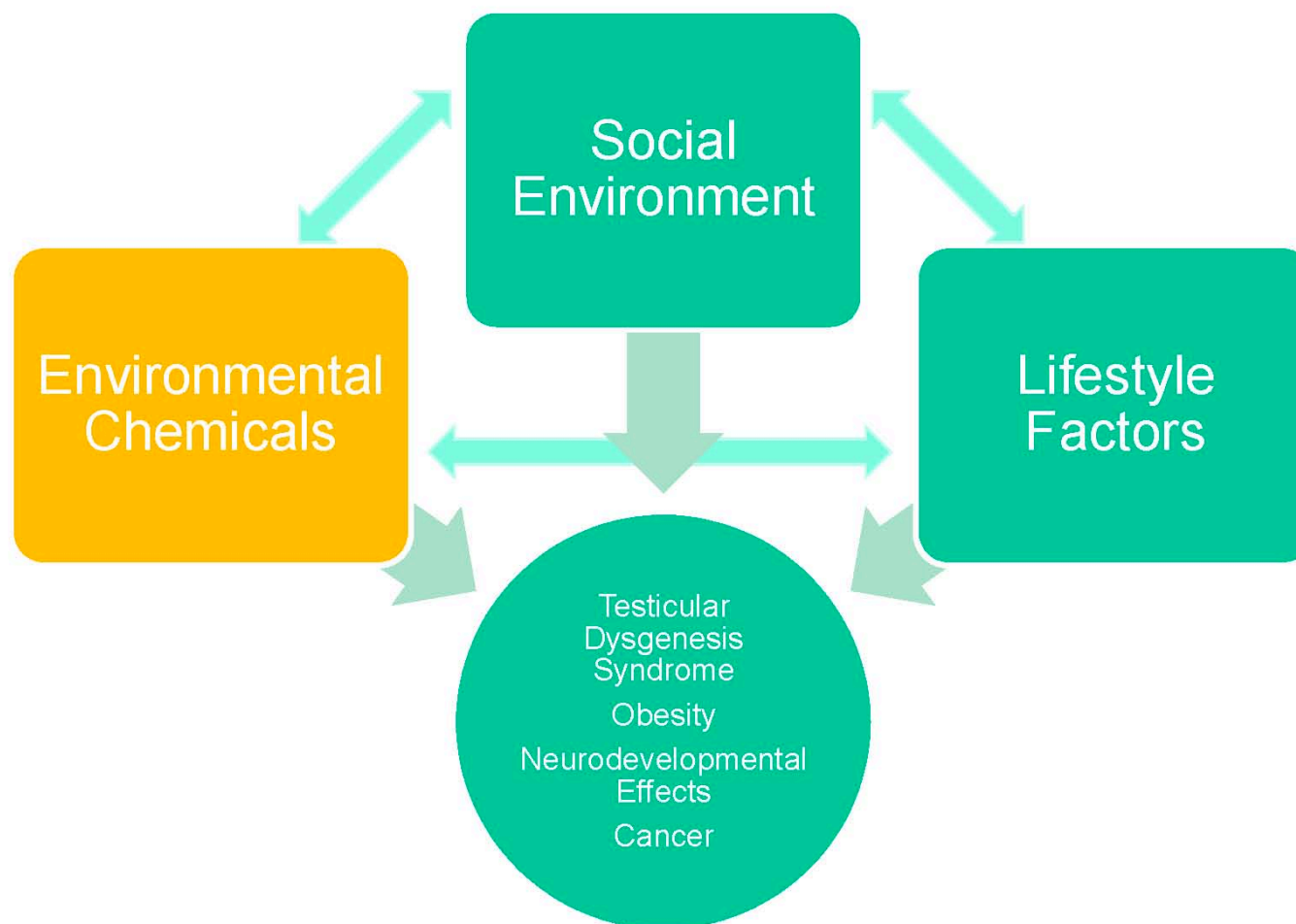
"THE COUNCIL OF THE EUROPEAN UNION

Second European Environment & Health Action Plan

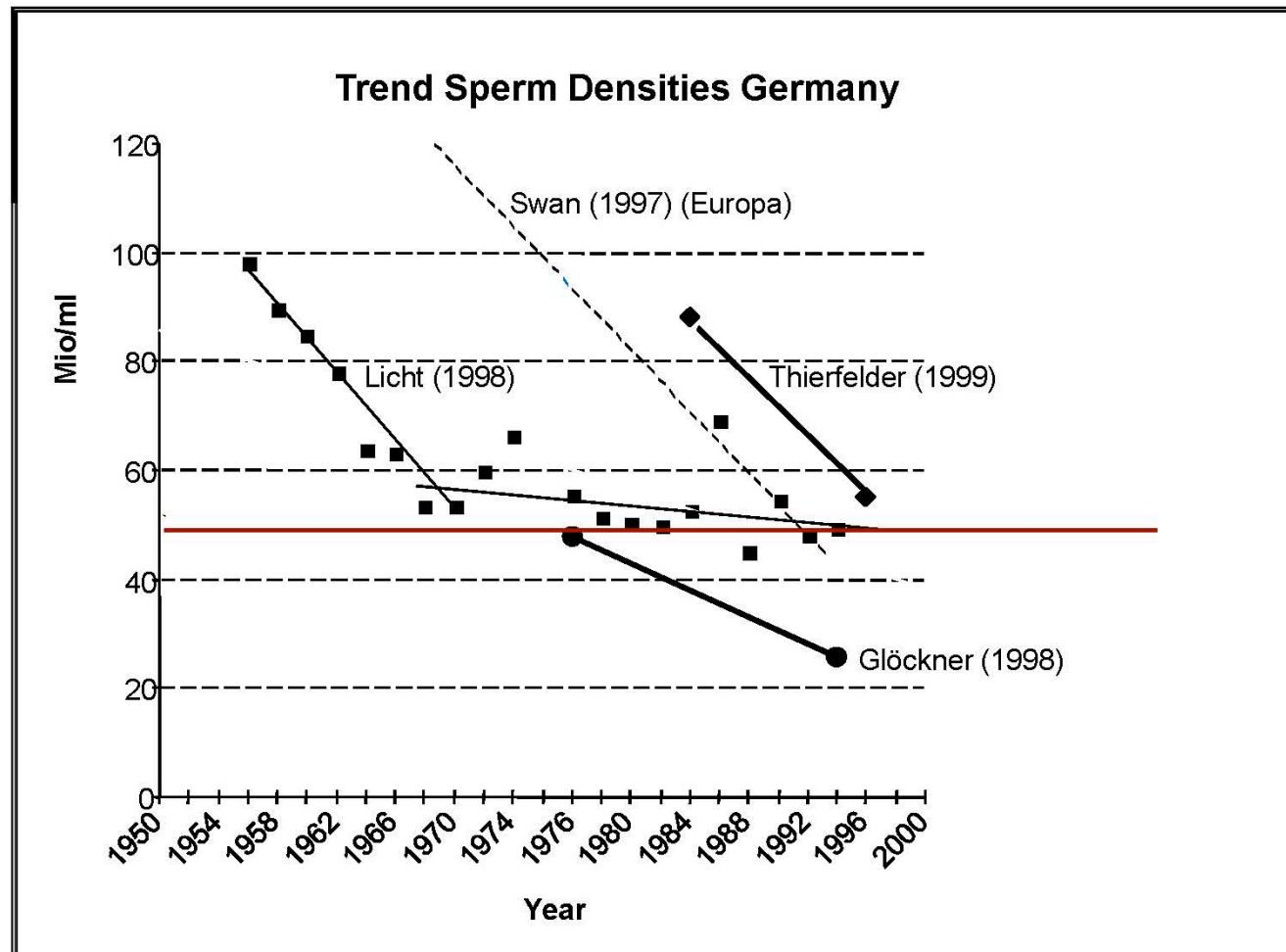
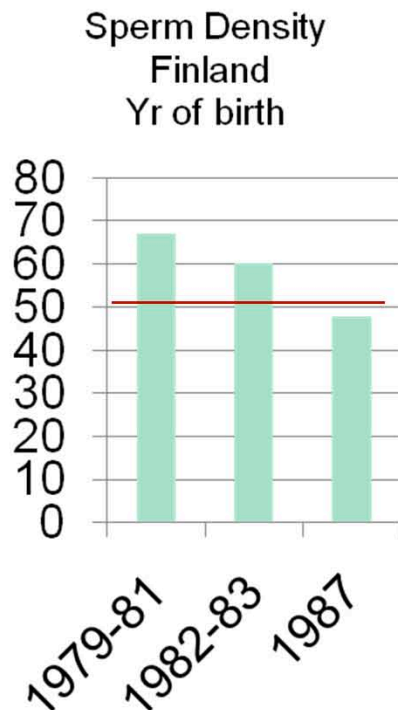
INVITES the Commission to further promote health through environment policy through the preparation as soon as possible of a second Environment and Health Action Plan (EHAP) in order to:

- address cross-cutting and emerging issues in a comprehensive way translating science into policies and actions;
- support the follow up and maintenance of network and activities developed within the framework of the EU Environment and Health Strategy and its first EHAP;
- ensure coherence and facilitate implementation of environment and health actions across EU;
- focus on the priorities also identified in the Parma Declaration on Environment and Health 6 ;
- evaluate the need for the development of specific measures for nanomaterials relating to risk assessment and management, information and monitoring, including the further development of a harmonized database for nanomaterials, while considering potential impacts;
- evaluate the need for the development of specific measures on endocrine disruptors and for the cumulative risk assessment of combination effects of chemicals, in order to ensure coherence of health aspects with the wider risk assessment of chemicals;

Health Assessment of Chemicals



Trend: Sperm Density in Germany



Source: N. Jørgensen et al.
Int. J. Androl. 2011

Possible causes for low reproductive health

- TCDD exposure in childhood (Mocarelli 2008),
- TCDD, OCDD in adipose tissue (Cok 2008)
- Actual phthalate exposure (Zhang 2006)
- Actual PCB and pesticide body burden (Hauser rev. 2006)
- Prenatal exposure to DES and synthetic estrogens: TDS (Skakkebaek 2004)
- Bisphenol A levels in urine (Li 2010)
- Phthalate metabolites in urine (Wirth 2008)
- Anabolic steroids (Schill 1985)
- Not Alcohol, smoking, bicycle riding (Al-Inany 2001)

Control of chemicals: REACH

- By the end of 2010
 - ECHA holds 2.75 mio preregistrations from 6500 companies
 - 4300 chemicals have been registered at the ECHA
 - 24675 dossiers have been submitted
- Substances :
 - more than 1000 tons per annum or
 - that are labeled as carcinogenic, mutagenic or toxic to reproduction (CMR Cat. 1&2/1A&1B) at more than 1 tpa, or
 - that are labeled as R50/53 (very toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment) at more than 100 tpa

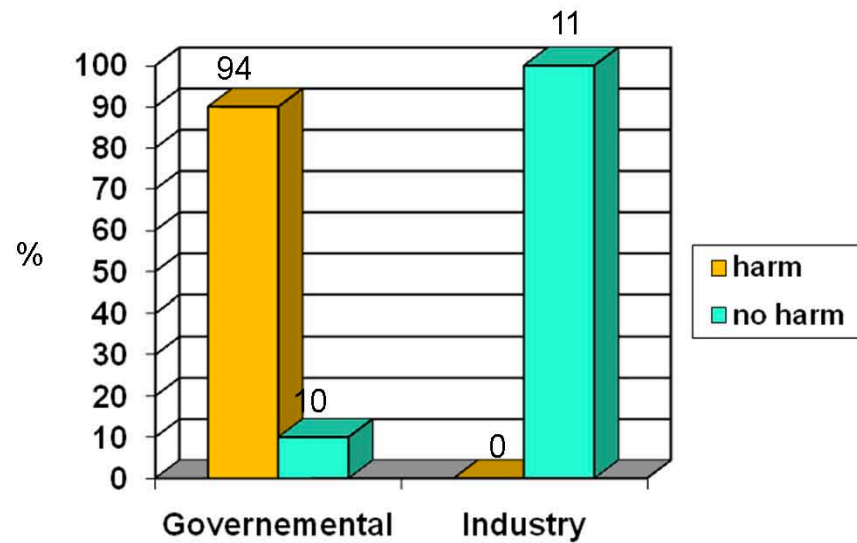




Appendixes Application for Authorisation: PPP

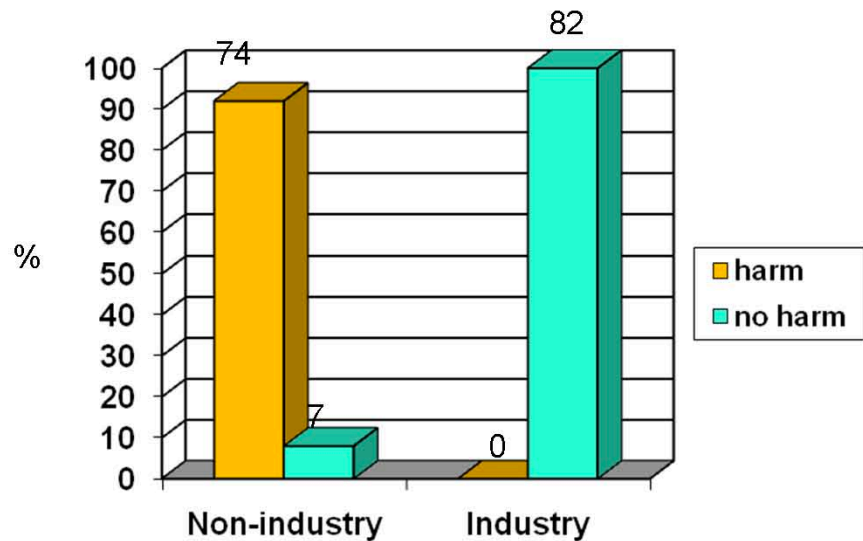


Outcome and Funding: There is a bias



Bisphenol A

Vom Saal 2005



Aspartam

Walton 2001

Additional control might be necessary

REACH

Industry



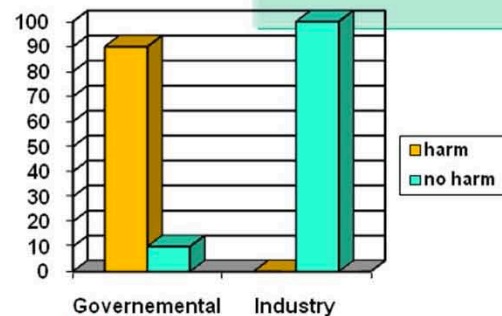
hires



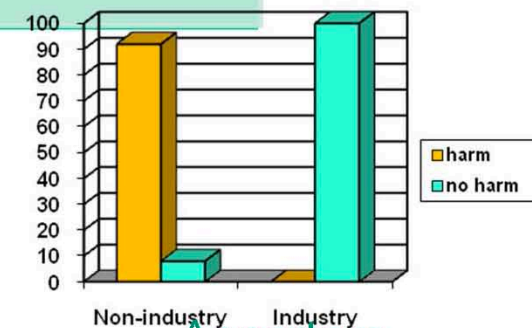
Contracting Labs



perform tests

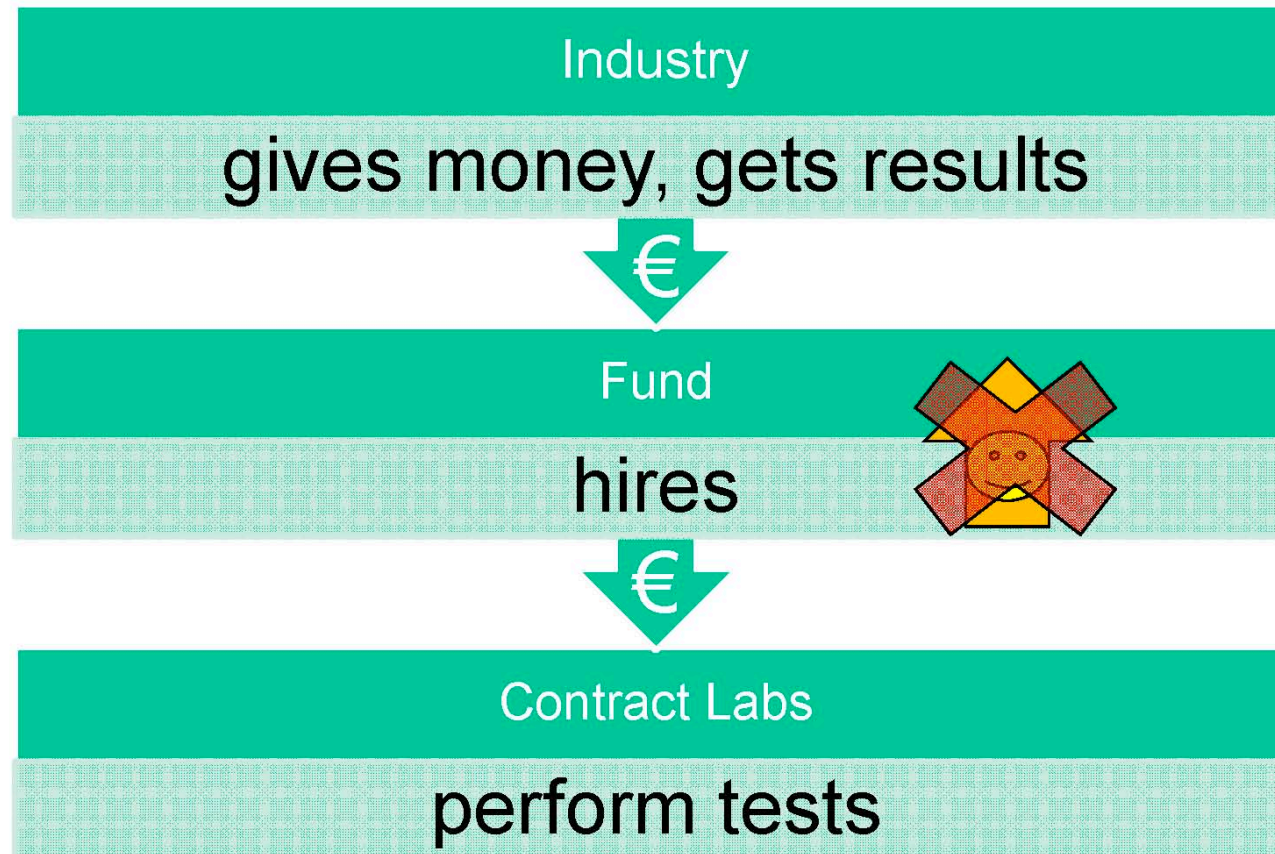


Bisphenol A



Aspartam

Post-REACH



Control of health assessment

Epidemiology and human biomonitoring



Seite 1/2

UMWELTBUNDESAMT
An Umwelt und Gesundheit

ROBERT KUCH INSTITUT
für Umwelt und Gesundheit

Studie zur Umweltbelastung von Kindern in Deutschland

Interviewgesteuerter Fragebogen an die Eltern

Gr/Nr. (Kind/Lebensjahr):

Datum der Erhebung: . . 200

Bürger Nr.:

Anmerkungen: Die folgenden Fragen werden allen Eltern gestellt. Die letzten Fragen sollen nur von der Eltern der 3. bis 10. Jahrgang gestellt werden und sind als solche gekennzeichnet.

Wohnort und Wohnung

Wie würden sich Kinder bei dem Wohnort/haus fühlen?

1. Ist es Ihnen in der Regel...?

Antwortmöglichkeiten: ☐ Sehr gut, ☐ Gut, ☐ Mittelmäßig, ☐ Schlecht

2. Ist es Ihnen in der Regel...?

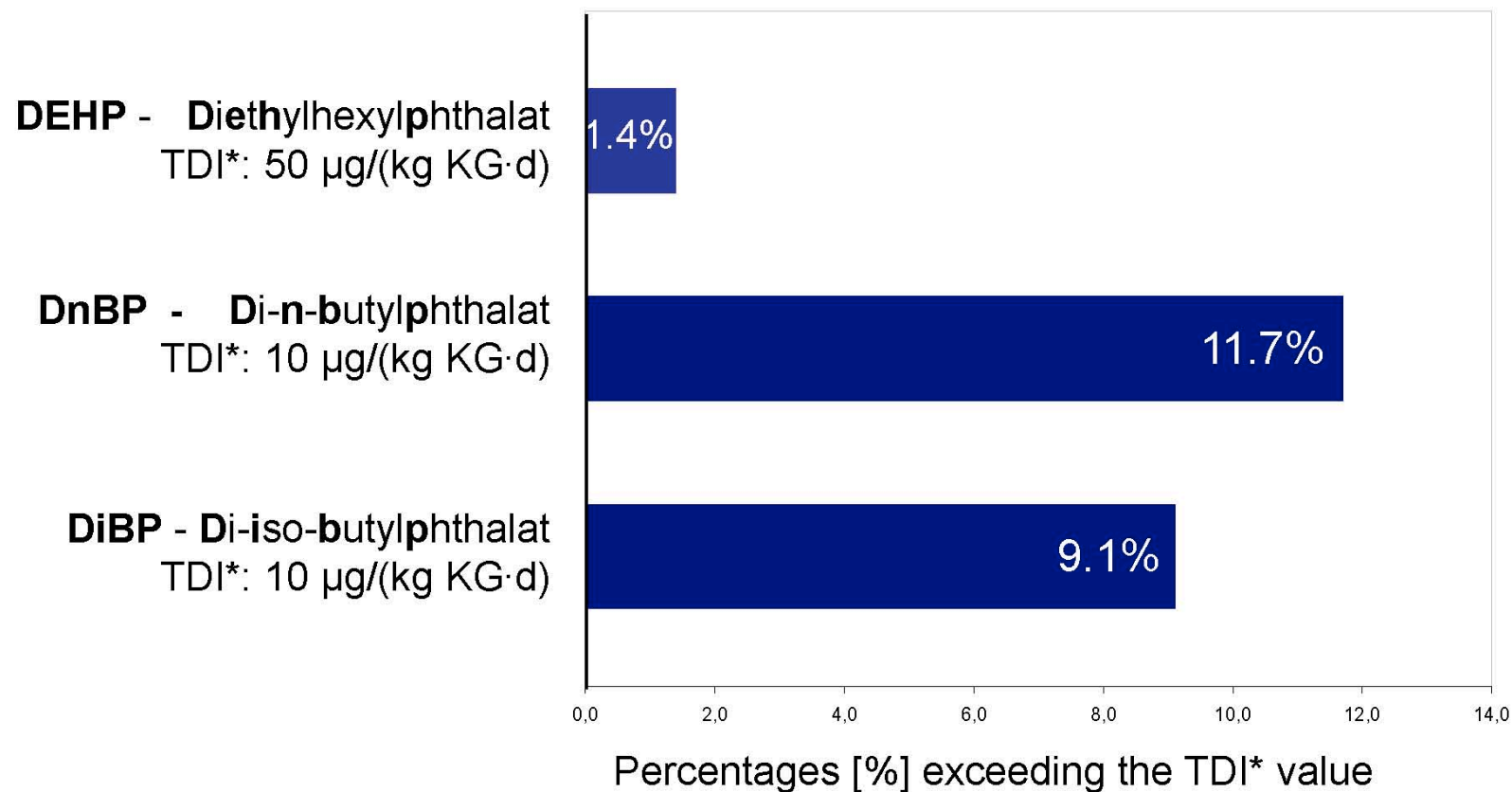
Antwortmöglichkeiten: ☐ Sehr gut, ☐ Gut, ☐ Mittelmäßig, ☐ Schlecht

- 1 -



Identification of a possible impact on health I

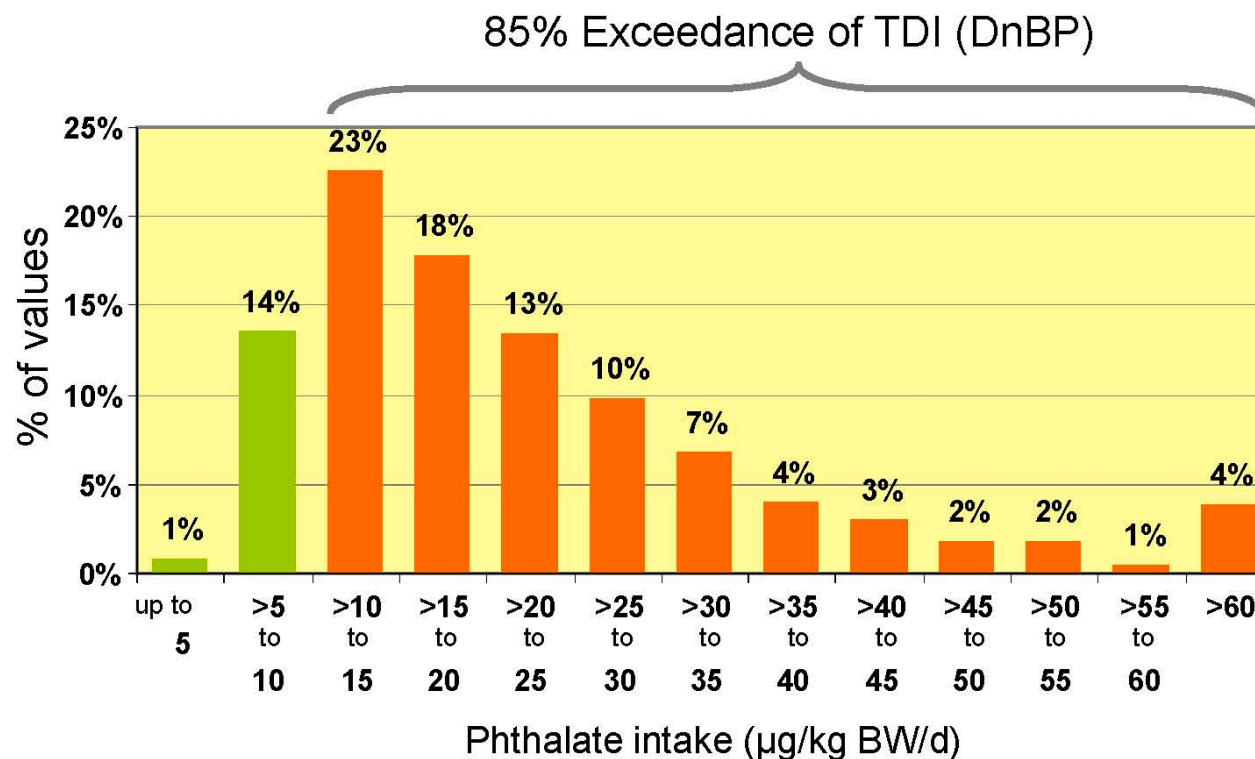
Phthalates metabolites in urine of children aged 3 to 14



* TDI: Tolerable Daily Intake

Identification of a possible impact on health II

Σ weighted intake rates of 5 phthalates



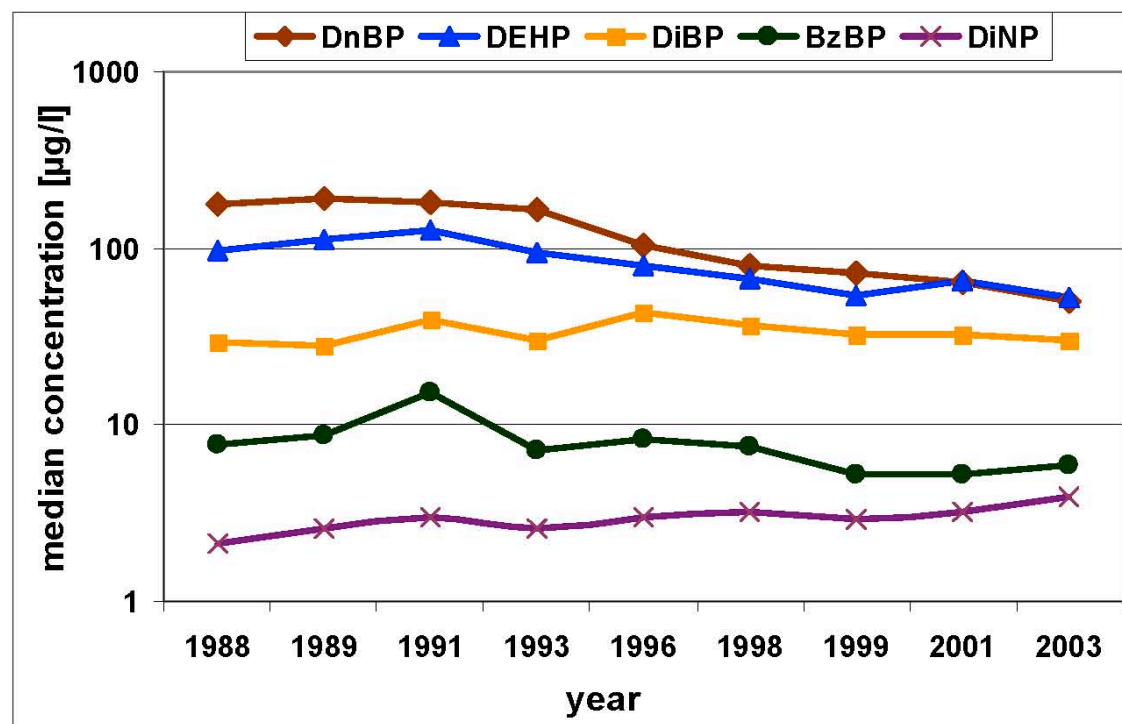
GerES (2003-2006): children aged 3 to 14

Weighting according to factors described by Earl Gray, US-EPA

Intake rates: daily intake related to volume calculated by Wittassek

Biomonitoring Phthalates


data from the German
ESB



Wittasek et al (2007)

Please remember the following:

- We have solved the simple problems in the field of environment and health
- The remaining problems are complex and need an integrated approach: Life science, social science, psychology...
- EHAP II is needed with targets, indicators, and control mechanisms
- Strengthening independent science
- Controlling risk assessment



**Thank you for your attention,
Thanks to all of my co-operators.
Andreas Gies**

andreas.gies@uba.de