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Submission to the Existing Chemical Program Review by the Community Taskforce on Multiple Chemical Sensitivities

This submission has been prepared on behalf of the Community Taskforce on Multiple Chemical Sensitivities in Western Australia. The Taskforce was formed in 2002 to address the complex issues of the impact of contemporary environmental practices on human health. Community organisations including the Yarloop and District Concerned Residents Committee, the Chemical Sensitivities Self Help Group, the Health Consumers' Council of WA Inc and the Alliance for a Clean Environment (Inc) are represented as well as concerned individuals, academics and medical practitioners. The Taskforce is convened by Giz Watson MLC.

Matters of interest to the Taskforce include lobbying for safe chemical spraying by Local Government authorities in public areas; having input into the establishment of the Environmental Health Foundation; and developing a best practice manual for pesticide use for distribution to Local Government possibly through the WA Local Government Association. The Taskforce is also lobbying the Minister for Health and senior bureaucrats from the Health Department in a bid to get MCS recognised as a medical condition.

Multiple Chemical Sensitivities

In 2005, the Parliament of South Australia's Social Development Committee conducted an Inquiry into Multiple Chemical Sensitivity (the Inquiry).¹ As this is the first comprehensive report into Multiple Chemical Sensitivity (MCS) in Australia, much of the information and data used in this submission comes from The Inquiry.

At present, there is no consensus on the definition of MSC and it is not recognised by the medical and scientific community as a specific disease in Australia. The Inquiry (p.1) noted 'that Germany is the only country to formally recognise MSC as a medical condition, the disorder is nonetheless recognised by a diverse range of authorities in many countries overseas, but predominately in the United States and Canada'. The Inquiry stated that:

MCS is a medical term in common use and is described in the 1999 Consensus diagnostic criteria on MCS as a chronic condition with symptoms occurring in multiple organ systems, that recur in response to low levels of

¹ The full report and recommendations can be accessed at
http://www.parliament.sa.gov.au/committees/lccdocuments/SD/public_documents/Tabled%20Reports/22nd%20Report%20Multiple%20Chemical%20Sensitivity.pdf

exposure to a range of chemicals and improve or resolve when these chemicals are removed. Characteristic symptoms can include headaches, burning eyes, nose and throat, concentration or memory lapses, nausea, muscle pain, dizziness, breathing problems and fatigue.

Evidence presented to the Inquiry indicated that studies suggest that up to 6% of the population may have MCS and that between 10–25% may have sensitivity or experience health effects from exposure to chemicals.

Environmental Health

The relationship between the environment and health is recognised by the use of the term 'environmental health'. This term refers not to the state of the environment, but to the impact of environmental conditions upon human health. The World Health Organisation (2003) estimates that poor environmental health contributes to 25% to 30% of global ill health.

The purpose of promoting safer chemical use is to protect human health and the environment. Communities all over WA are increasingly concerned about the risk posed by the use of chemicals. Examples include industrial pollution sources and air quality impacts, spraying of pesticides, herbicides and fungicides by local councils and farmers, and chemicals in our food, water and homes.

General Recommendations

Recommendation 1: That the precautionary principle (as defined under the Bruntland Convention Rio 2000) be used as a basis of all recommended changes to the NICNAS Existing Chemicals Assessment Program.

Research indicates that there are particular sectors of the population who are sensitive to pesticides. Children are especially sensitive to chemical exposure of all kinds for several reasons, including the vulnerability caused by a developing immune system. The elderly are at increased risk from pesticide exposure as the immune system becomes less effective with age. Anyone with moderate to serious health problems may also be more vulnerable to the effects of pesticides for the duration of their illness, while their body is under stress.

Recommendation 2: That the assessment and regulation of existing and new chemicals takes into account the life cycle of the chemical and its impact on the human health, particularly for those vulnerable sections of the population such as children.

Recommendation 3: That all recommendations of the discussion paper be implemented. See additions comments on specific proposals that the Taskforce believes are vital to be implemented.

Proposal 6

Examine and introduce a nationally coordinated system of surveillance, monitoring and post-market reporting for industrial chemicals which would:

- increase the knowledge base on industrial chemicals in use in Australia and therefore lead to safe and sustainable use
- provide information to assist with risk management strategies through identification of adverse impacts

- provide early warning of emerging patterns of health and environmental risks, and
- provide assistance in development of best practice surveillance, monitoring and post-market reporting activities via a feedback mechanism.

Recommendation 4: That there be a nationally coordinated reporting requirements and mechanisms which identify trends in adverse experiences and gather information to assist chemical assessment.

Proposal 10

Amend the legislation to broaden the information-gathering powers of NICNAS for all types of assessments and related processes.

Currently, there is not agency cross-referencing of monitoring chemicals in the environment and their impact on public health. For example, it is important that body burden monitoring and environmental monitoring of chemicals feed into the process of assessing new chemicals and identify bioaccumulation and environmental indicators of chemicals currently in use.

Recommendation 5: That NICNAS be granted enhanced powers to gather information as discussed in proposal 10.

Proposal 11

Engage downstream users on a chemical-specific basis, ie. identify relevant downstream users at the beginning of each chemical assessment.

Recommendation 6: That downstream users be identified with regard to their use, storage and disposal of chemicals with a view to regulate the safe use and disposal of chemicals.

I look forward to hearing the results of your inquiry.

Yours sincerely



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Chair Community Taskforce on Multiple Chemical Sensitivities

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