

January 25, 2012

Representative Larry Liston Colorado State Representative, District 16 Chair, Economic and Business Development Committee 200 E. Colfax Denver, CO 80203

Re: House Bill 12-1174 - Oppose

Dear Representative Liston,

I write to you today on behalf of the Polycarbonate/BPA Global Group of the American Chemistry Council<sup>1</sup> in regard to HB 12-1174, which I understand has been assigned to your committee. The Polycarbonate/BPA Global Group represents the leading global manufacturers of bisphenol A (BPA) and polycarbonate plastic. For many years the group has sponsored scientific research to understand whether BPA has the potential to cause health or environmental effects and to support scientifically sound policy.

Beginning July 1, 2012, HB 12-1174 would prohibit the sale by a manufacturer or wholesaler of certain children's products that contain any amount of BPA, even trace level impurities. Included are pacifiers and shatter-resistant bottles or cups made from polycarbonate plastic that are designed or intended to be used by a child under three years of age. Beginning July 1, 2013, HB 12-1174 would prohibit the sale of these products by any person in Colorado. As briefly outlined in this letter and attachments, we oppose HB 12-1174 and encourage you to vote No on this bill.

#### Bisphenol A is Used to Make Clear, Highly Shatter-Resistant Polycarbonate Plastic

Bisphenol A is used primarily as a raw material to make polycarbonate plastic. Polycarbonate is a clear, highly shatter-resistant plastic that is used in a wide range of consumer

¹ The American Chemistry Council represents the leading companies engaged in the business of chemistry. Council members apply the science of chemistry to make innovative products and services that make people's lives better, healthier and safer. The Council is committed to improved environmental, health and safety performance through Responsible Care®, common sense advocacy designed to address major public policy issues, and health and environmental research and product testing. The business of chemistry is a \$435 billion enterprise and a key element of the nation's economy. It is the nation's largest exporter, accounting for ten cents out of every dollar in U.S. exports. Chemistry companies invest more in research and development than any other business sector.

products such as sports safety equipment (e.g., bicycle or hockey helmets), components of lifesaving medical devices (e.g., blood oxygenators, incubators), eyeglass lenses, CDs and DVDs, electronic equipment housings, automobile components (e.g., headlamp lenses) and certain reusable food or beverage containers.

Polycarbonate has been used commercially for more than 50 years and, during this time, BPA has become one of the best tested substances in commerce. It is important to note that polycarbonate plastic is formed by a chemical reaction between BPA and other substances. As a result of the chemical reaction, polycarbonate in finished form contain only trace levels of residual BPA, typically less than 50 parts per million (< 0.005% by weight).

#### No Scientific Basis To Support HB 12-1174

With the exception of pacifiers, the products that would be prohibited by HB 12-1174 are regulated nationally by the US Food and Drug Administration (FDA). To address recent controversy regarding BPA, FDA is currently undertaking a scientific review of the safety of BPA in food contact products. In its most recent update in January 2010, as summarized in Attachments 1 and 2, FDA reaffirmed that "BPA is not proven to harm children or adults." As noted by Dr. Joshua Sharfstein of FDA, "If we thought it was unsafe, we would be taking strong regulatory action," and "the FDA does support the use of baby bottles with BPA."

In addition to reviewing existing scientific information on BPA, FDA is also conducting research in its own laboratory to answer key scientific questions and clarify uncertainties. To date, FDA has published eight studies from their ongoing research in the peer-reviewed scientific literature. <sup>2,3,4,5,6,7,8,9</sup> Collectively, these new studies provide additional strong support for FDA's current view that BPA is safe for use in food contact products made from polycarbonate plastic.

It is also important to note that many other regulatory agencies worldwide have also reviewed the science on BPA and have determined that BPA is safe for use in food contact products. These reviews are also summarized in Attachments 1 and 2. Most recently, in December 2011, the European Food Safety Authority updated their comprehensive scientific assessment of BPA that had been conducted by a panel of independent scientific experts from throughout Europe. The update reaffirmed the panel's previous conclusion that they "could not identify any new evidence which would lead them to revise the current Tolerable Daily Intake [TDI]," which is a safe intake level. In its previous updates, EFSA stated that the TDI "provides a sufficient margin of safety for the protection of the consumer, including fetuses and newborns."

#### No Current Need for Consideration of HB 12-1174

To our knowledge, polycarbonate baby bottles and sippy cups (i.e., spill-proof cups for children) have not been available in the US market for 2-3 years and there is no reason to believe they will become available in the future. All baby bottles and spill-proof cups currently available in the US market are made from other plastics or glass. For this reason, we have petitioned FDA to revise their regulation on the use of polycarbonate plastic in food-contact products to exclude

baby bottles and spill-proof cups (see Attachments 3 and 4). FDA's pending action will make HB 12-1174 redundant and unnecessary since polycarbonate baby bottles and spill-proof cups will be uniformly addressed nationally. Similar action by individual states will only add regulatory burden at the state level with no benefit to the public.

Beyond the category of spill-proof cups that will be addressed by FDA's pending action, it's not clear what other cups, cup lids and straws intended for use by a child (under three years of age) would be covered by HB 12-1174. Spill-proof cups, which include built-in cup lids and straws, are the primary product used by young children. Commonly available cup lids and straws for general use are made from materials that do not contain BPA.

Baby bottle liners are made from flexible plastics that do not contain BPA. Polycarbonate is a hard, rigid plastic that would not be suitable for use as a bottle liner. Prohibiting baby bottle liners that contain BPA also would only add regulatory burden at the state level with no benefit to the public since BPA never has been or likely ever will be used in these products.

Finally, polycarbonate plastic would only be used as a pacifier shield, which is held by an infant rather than being placed in the mouth. If used in this application at all, polycarbonate provides a safety benefit since it is highly shatter-resistant, which significantly reduces the potential for the shield to crack, chip or break into small pieces. Pacifier nipples, which are placed in the mouth, are made from other materials that do not contain BPA.

Based on the extensive scientific database available for BPA, the many scientific reviews by regulatory bodies worldwide that reaffirm the safety of BPA, and the lack of any current need for legislation in this area, we encourage you to vote No on HB 12-1174.

Please feel free to contact me at any time if you have any questions or need further information. I can be reached at (202) 249-6624 and by e-mail at steve hentges@americanchemistry.com.

Regards,

Steven G. Hentges, Ph.D.

Polycarbonate/BPA Global Group

#### Attachments

<sup>&</sup>lt;sup>2</sup> Doerge, D. R., Twaddle, N. C., Woodling, K. A., and Fisher, J. W. 2010. Pharmacokinetics of bisphenol A in neonatal and adult rhesus monkeys. Toxicology and Applied Pharmacology. 248(1):1-11.

<sup>&</sup>lt;sup>3</sup> Doerge, D. R., Twaddle, N. C., Vanlandingham, M., and Fisher, J. W. 2010. Pharmacokinetics of bisphenol A in neonatal and adult Sprague-Dawley rats. Toxicology and Applied Pharmacology. 247(2):158-165.

<sup>&</sup>lt;sup>4</sup> Doerge, D. R., Vanlandingham, M., Twaddle, N. C., and Delclos, K. B. 2010. Lactational transfer of bisphenol A in Sprague-Dawley rats. Toxicology Letters. 199(3):372-376.

<sup>&</sup>lt;sup>5</sup> Twaddle, N. C., Churchwell, M. I., Vanlandingham, M., and Doerge, D. R. 2010. Quantification of deuterated bisphenol A in serum, tissues, and excreta from adult Sprague-Dawley rats using liquid chromatography with tandem mass spectrometry. Rapid Communications in Mass Spectrometry. 24(20):3011-3020.

<sup>&</sup>lt;sup>6</sup> Doerge, D. R., Twaddle, N. C., Vanlandingham, M., Brown, R. P., and Fisher, J. W. 2011. Distribution of bisphenol A into tissues of adult, neonatal, and fetal Sprague-Dawley rats. Toxicology and Applied Pharmacology. 255(3):261-270.

<sup>&</sup>lt;sup>7</sup> Doerge, D. R., Twaddle, N. C., Vanlandingham, M., and Fisher, J. W. 2011. Pharmacokinetics of bisphenol A in neonatal and adult CD-1 mice: Inter-species comparisons with Sprague-Dawley rats and rhesus monkeys. Toxicology Letters. 207(3):298-305.

<sup>&</sup>lt;sup>8</sup> Fisher, J. W., Twaddle, N. C., Vanlandingham, M., and Doerge, D. R. 2011. Pharmacokinetic modeling: Prediction and evaluation of route dependent dosimetry of bisphenol A in monkeys with extrapolation to humans. Toxicology and Applied Pharmacology. 257(1):122-136.

<sup>&</sup>lt;sup>9</sup> Ferguson, S. A., Law, C. D., and Abshire, J. S. 2011. Developmental treatment with bisphenol A or ethinyl estradiol causes few alterations on early preweaning measures. Toxicological Sciences. 124(1):149-160.



#### GOVERNMENT AND INDEPENDENT SCIENTIFIC ASSESSMENTS OF BISPHENOL A

#### **United States**

• U.S. Food and Drug Administration (FDA) and Department of Health and Human Services (HHS) – In January 2010, FDA and HHS reaffirmed that "BPA is not proven to harm children or adults."

As stated by FDA: "Studies employing standardized toxicity tests have thus far supported the safety of current low levels of human exposure to BPA." As further noted by Dr. Joshua Sharfstein of FDA: "If we thought it was unsafe, we would be taking strong regulatory action" and "the FDA does support the use of baby bottles with BPA."

In recognition of some concern related to effects reported in certain recent studies, FDA is carrying out in-depth studies in conjunction with the National Toxicology Program to answer key questions and clarify uncertainties. In the interim, FDA is taking reasonable steps to reduce human exposure to BPA in the food supply and stated:

"Given that these are preliminary steps being taken as a precaution, it is important that no harmful changes be made in food packaging or consumption, whether by industry or consumers, that could jeopardize either food safety or reduce access to and intake of food needed to provide good nutrition, particularly for infants."

- U.S. Environmental Protection Agency (EPA) In March 2010, EPA released a BPA "Action Plan" that outlines EPA's review of BPA and their plans for follow-up actions. Notably, EPA did not propose any actions, regulatory or otherwise, regarding human health but will continue to coordinate closely with FDA, CDC and NIEHS.
- U.S. National Toxicology Program (NTP) The September 2008 NTP final report on the potential for BPA to affect human reproduction or development found no direct evidence for health effects in people. It also confirmed that human exposure to BPA is very low.
  - On a standard five-level scale ranging from 'serious concern' to 'negligible concern,' NTP reported no concerns for any age group at the top two levels and only negligible concern for adults. Based on what NTP characterized as limited and inconclusive evidence from laboratory animal studies, NTP expressed 'some concern' regarding effects on the brain, behavior, and the prostate gland but noted that additional research is needed to better understand whether these findings are of any human health significance. The NTP report is designed to serve as a resource to regulatory agencies and has specifically been considered in FDA's ongoing safety assessment.
- California Proposition 65 In July 2009 a panel of independent scientific experts convened by the California
  EPA's Office of Environmental Health Hazard Assessment unanimously concluded that BPA should not be listed as
  a reproductive or developmental toxicant under California's Proposition 65 law. That law can require warnings
  when listed substances are present in consumer products. The panel's decision was based on their own review of the
  scientific evidence on BPA, including their assessment of the NTP report.
- NSF International (a not-for-profit public health and safety organization) In February 2008, NSF published its comprehensive safety assessment of BPA and set a safe intake level for BPA in drinking water. That level is comparable to the level established by the European Food Safety Authority for BPA in food. The assessment was led by Dr. Calvin Willhite, a respected scientist with the California Department of Toxic Substances Control.
- In October 2008, an expert scientific panel, convened by Gradient Corporation, published the results of its weight-of-the-evidence evaluation of low-dose reproductive and developmental effects of BPA. This evaluation is the third in a series that began with an evaluation, published in 2004, by an independent panel of scientific experts organized by the Harvard Center for Risk Analysis. Based on its review of scientific literature available through July 2008, the panel concluded: "The weight of evidence does not support the hypothesis that low oral doses of BPA adversely affect human reproductive and developmental health."

#### ATTACHMENT 1

#### WHO and FAO

• In November 2010, an international panel of experts organized by WHO (World Health Organization) and FAO (Food and Agriculture Organization of the United Nations) reviewed all the latest scientific evidence on BPA and concluded that "initiation of public health measures would be premature." The experts also concluded that BPA does not accumulate in the body, is rapidly eliminated in urine, and that it is difficult to interpret the relevance of studies claiming adverse health effects from BPA.

#### **Canada**

• Health Canada – In October 2008, the Canadian government announced the conclusion of its screening risk assessment stating: "The current research tells us the general public need not be concerned. In general, most Canadians are exposed to very low levels of bisphenol A, therefore, it does not pose a health risk."

With respect to infants under 18 months, it said "[s]cience tells us that exposure levels are below those that could cause health effects; however, due to the uncertainty raised in some studies relating to the potential effects of low levels of bisphenol A, the Government of Canada is taking action to enhance the protection of infants and young children." Based on precaution, Health Canada is working with industry to achieve the lowest reasonably achievable levels of BPA in infant formula, and has recently finalized a regulation to ban polycarbonate baby bottles. The ban applies only to baby bottles and not to other polycarbonate bottles, tableware and food containers.

In 2009-2010, Health Canada released a series of reports with new data on BPA in baby food, infant formula, canned food and beverages, and bottled water. According to Health Canada, these new data confirm Health Canada's previous conclusion that "the current dietary exposure to BPA through food packaging is not expected to pose a health risk to the general population, including infants and children."

#### Europe

• European Food Safety Authority (EFSA) – In December 2011, EFSA updated their comprehensive scientific assessment of BPA that had been conducted by a panel of independent scientific experts from throughout the European Union. The update reaffirmed the panel's previous conclusion (September 2010) that they "could not identify any new evidence which would lead them to revise the current Tolerable Daily Intake," which is a safe intake level.

In 2007, the panel <u>increased</u> by a factor of five the safe intake level established in 2002, based on the panel's view that recent data provided more certainty about the safety of BPA. With interim updates in 2008, EFSA reconfirmed its position that polycarbonate and epoxy food contact products are safe for their intended uses, stating that the TDI "provides a sufficient margin of safety for the protection of the consumer, including fetuses and newborns."

Similar to Canada, the European Commission has recently decided on a precautionary ban on polycarbonate baby bottles. However, the Commission has also confirmed that there is no scientific evidence to support extending the ban to any other products.

- German Society of Toxicology (SOT) In April 2011 the Advisory Committee of the SOT, comprised of leading German regulatory scientists, released their detailed review of the science on BPA. Published in the peer-reviewed scientific journal Critical Reviews in Toxicology, the committee concluded "BPA exposure represents no noteworthy risk to the health of the human population, including newborns and babies." In regard to the safe intake level established by EFSA, the committee further concluded that the "current Tolerable Daily Intake level for BPA is adequately justified."
- The French Food Safety Authority (AFSSA, February 2010), the Danish Environmental Protection Agency (October 2008), the German Federal Institute for Risk Assessment (January 2010), the Dutch Food and Consumer Product Safety Agency (November 2008), and the Swiss Federal Office of Public Health (February 2009) have all re-evaluated BPA in light of recent studies and government decisions; all conclude that BPA is safe for use in food contact applications. Based on precaution, Denmark has implemented a temporary ban on food contact products for infants in Denmark; a recent Danish expert review found no clear evidence for harmful effects.

#### ATTACHMENT 1

• European Union – In June 2008, an updated comprehensive European Commission Risk Assessment Report confirmed that BPA does not pose a risk to the general public from all current sources of exposure, including use of polycarbonate plastic and epoxy resins in consumer products. No bans or restrictions were proposed based on this assessment. The update takes into account the latest scientific studies available (through 2007) and completes a comprehensive assessment undertaken on BPA over 10 years.

#### Japan

- Japanese National Institute of Advanced Industrial Science and Technology (affiliated with the Japanese Ministry of Economy, Trade and Industry) In July 2011, AIST issued a comprehensive update to their previous assessment and confirmed no risk of BPA to human health, including infants and children. New results from FDA's in-depth studies on BPA, along with other recent studies, supported the updated conclusion. Notably, the new FDA results also provided a substantial part of the basis for a reduction in the uncertainty factor from 100 to 25, which indicates that the science supporting the safety of BPA is now stronger and with less uncertainty.
- Japanese Ministry of Environment In 2005, based on its own comprehensive testing, the Ministry concluded that there were no clear endocrine disrupting effects found at low doses and that no regulatory action is required to manage risks.

#### Australia and New Zealand

- Food Standards Australia New Zealand (FSANZ an independent statutory agency responsible for setting food standards in the two countries) In November 2010, FSANZ reaffirmed the safety of BPA and stated: "FSANZ has evaluated the safety of BPA in food, including that consumed by infants and concluded that levels of intake of BPA are very low and do not pose a significant human health risk for any age group."
- Australian Competition & Consumer Commission (ACCC the Australian regulatory agency responsible for consumer product safety) ACCC recently stated: "The weight of scientific evidence currently available indicates that BPA in plastics does not present a risk to human health."

#### China and Hong Kong

- China In May 2011, the Chinese Ministry of Health, along with five other government agencies stated that adverse effects of BPA on human health have not yet been found. Based on precaution, China has implemented a ban on BPA in baby bottles but has also noted that the use of BPA continues to be allowed for all other food packaging materials, coatings and containers.
- Hong Kong Centre for Food Safety (CFS) Based on advice from their independent Expert Committee on Food Safety in January and December 2011, CFS stated that they concur with the conclusion of the WHO/FAO experts that "initiation of public health measures would be premature based on current knowledge of BPA." The CFS is the government food authority for the Hong Kong Special Administrative Region of China.

#### **ATTACHMENT 2**



#### BISPHENOL A OVERVIEW

Regulatory bodies around the world have assessed the science on bisphenol A (BPA). Not one has concluded that BPA has been proven to be unsafe in its current uses. Products made with BPA contribute to the health and safety of Americans and contribute more than 100,000 jobs totaling \$6.1 billion in wages to the US economy.

## 1. <u>US Food and Drug Administration and Department of Health and Human Services reaffirmed that</u> "BPA is not proven to harm children or adults" (January 2010).

According to FDA: "Studies employing standardized toxicity tests have thus far supported the safety of current low levels of human exposure to BPA." As further noted by Dr. Joshua Sharfstein of FDA: "If we thought it was unsafe, we would be taking strong regulatory action" and "the FDA does support the use of baby bottles with BPA."

In recognition of some concerns related to effects reported in certain recent studies, FDA is carrying out in-depth studies in conjunction with the National Toxicology Program to answer key questions and clarify uncertainties. In the interim, FDA is taking reasonable steps to reduce human exposure to BPA in the food supply and stated:

"Given that these are preliminary steps being taken as a precaution, it is important that no harmful changes be made in food packaging or consumption, whether by industry or consumers, that could jeopardize either food safety or reduce access to and intake of food needed to provide good nutrition, particularly for infants."

## 2. Regulatory bodies around the world have assessed the science on BPA and have determined that BPA is safe for use in food contact products.

- European Food Safety Authority (December 2011)
- ➤ European Commission Risk Assessment (June 2008)
- > Swiss Federal Office of Public Health (February 2009)
- > French Food Safety Authority (February 2010)
- Dutch Food and Consumer Product Safety Authority (November 2008)
- ➤ Danish Environmental Protection Agency (October 2008)
- ➤ German Federal Institute for Risk Assessment (January 2010)
- ➤ Hong Kong Centre for Food Safety (December 2011)
- Food Standards Australia and New Zealand (November 2010)
- > Japanese National Institute of Advanced Industrial Science and Technology (July 2011)
- ➤ Health Canada (October 2008, July 2009, August 2010)
- After reviewing all the latest scientific evidence on BPA, an international panel of experts organized by the World Health Organization (WHO) and the Food and Agriculture Organization of the United Nations (FAO) concluded that "initiation of public health measures would be premature." The panel also concluded that BPA does not accumulate in the body, is rapidly eliminated in urine, and that it is difficult to interpret the relevance of studies claiming adverse health effects from BPA.
- Prohibitions of polycarbonate baby bottles in Canada (2010), Europe (2011) and China (2011) are based on precaution. The Health Canada scientific assessment concluded that exposure to BPA, including from baby bottles, is below levels that pose a risk. Similarly, the European Food Safety Authority recently reconfirmed its position that polycarbonate and epoxy food contact products, including baby bottles, are safe and the Chinese Ministry of Health stated that adverse effects of BPA on human health have not yet been found.

- In July 2009 a panel of independent scientific experts convened by the California EPA's Office of Environmental Health Hazard Assessment unanimously concluded that BPA should not be listed as a reproductive or developmental toxicant under California's Proposition 65 law.
- In March 2010, the US Environmental Protection Agency (EPA) released a BPA "Action Plan" that outlines EPA's review of BPA and their plan for follow-up actions. Notably, EPA did not propose any actions, regulatory or otherwise, regarding human health but will continue to coordinate with FDA and other agencies.
- Existing food safety programs are already precautionary they use safety factors, typically between 100 and 1000, to create a margin of safety between public exposure and levels that cause effects in laboratory animals.
  - For example, the European Food Safety Authority (EFSA) set a Tolerable Daily Intake (TDI) by applying a safety factor of 100 to the No-Observed-Adverse-Effect-Level from laboratory animal studies. The TDI is the amount of BPA a consumer (including infants) can safely ingest without harm over a whole lifetime.
    - A consumer would have to ingest more than 500 pounds of food and beverages in contact with BPA every day for a lifetime to exceed the TDI set by EFSA
    - > A 22 pound infant would have to drink more than 423 4 oz bottles per day to exceed the TDI

#### 3. Products Made with BPA Contribute to the Health and Safety of Americans

- Epoxy resins are used as a protective coating in most metal food and beverage containers to help prevent corrosion and contamination, avoid food spoilage and provide a shelf life of two years or more.
  - > Canned infant formula is provided to more than 8 million low-income women, infants and children at nutritional risk under the federal Special Nutrition Program for Women, Infants and Children (WIC)
- Shatter-resistant polycarbonate plastic can be found in many products that contribute to health and safety:
  - Plastic bottles and cups without the risk of cuts from broken and chipped glass
  - > Sports safety glasses (polycarbonate lenses are recommended by the American Academy of Ophthalmology)
  - > Helmets
  - > Sports safety equipment, such as face shields and face guards
  - ➤ Life-saving medical devices such as incubators and kidney dialysis machines
  - > Blast and bullet resistant shielding to protect government officials, police, prison officials, military personnel, as well as bank tellers and convenience store clerks
- Polycarbonate is used to make lightweight products such as automotive parts that save energy and reduce greenhouse gas emissions.

#### 4. BPA Makes an Important Contribution to U.S. Economy (2007 data)

- Along with 9 plants that manufacture BPA, polycarbonate plastic or epoxy resins, approximately 1,400 downstream facilities in the U.S. process polycarbonate or epoxy into finished products nearly all states are represented with an investment value of \$6 billion.
- More than 39,000 workers are employed *directly* in chemical processing and plastic/resin facilities and downstream fabrication facilities.
- An additional 64,700 workers are employed *indirectly*. These individuals are employed in the wide network of supplier industries that provide goods and services (raw materials, utilities, capital goods, services) to businesses that rely on polycarbonate plastic and epoxy resins.
- \$6.1 billion in total wages (direct and indirect employment). \$1.3 billion in federal/state/local taxes, plus \$894 million in Social Security and Medicare taxes are paid in relation to the 39,000 workers directly employed in chemical processing and plastic/resin facilities and downstream fabrication facilities.

Attachment 3



### **News Release**

Embargoed for Release 1 p.m. EST Contact: Kathryn St. John (202) 249-6513

Email: Kathryn St.John@americanchemistry.com

October 7, 2011

# ACC ASKS FDA TO REVISE CERTAIN REGULATIONS ON BISPHENOL A (BPA) IN BABY BOTTLES AND SIPPY CUPS

WASHINGTON, D.C. (October 7, 2011) – The American Chemistry Council (ACC) has asked the U.S. Food and Drug Administration (FDA) to revise certain regulations on BPA to clarify for consumers that BPA is no longer used to manufacture baby bottles and sippy cups and will not be used in these products in the future.

"Although governments around the world continue to support the safety of BPA in food contact materials, confusion about these products has become an unnecessary distraction to consumers, legislators and state regulators," said Steven G. Hentges, Ph.D., of the Polycarbonate/BPA Global Group of ACC. "FDA action on this request will provide certainty that BPA is not used to make the baby bottles and sippy cups on store shelves, either today or in the future."

Recent state actions have contributed to confusion about whether baby bottles and sippy cups sold in the United States contain BPA. In fact, manufacturers of baby bottles and sippy cups announced several years ago that due to consumer preference they had stopped using BPA in these products.

FDA has the scientific expertise and specific responsibility to make regulatory decisions about BPA and food-contact materials. For this reason, ACC has consistently opposed efforts by federal and state officials to impose legislative restrictions that conflict with FDA's authority and create a patchwork of inconsistent laws or regulations.

BPA is one of the most thoroughly tested chemicals in commerce today. The consensus of government agencies across the world is that BPA is safe for use in food-contact materials intended for infants and toddlers.

ACC and its member companies that manufacture and use BPA are committed to providing the materials that make possible the many consumer products that protect public health and safety. Companies have and will continue to develop scientific data to inform credible, transparent scientific assessments of BPA so that the public can have the confidence it deserves in the safety of the products made with BPA.

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#### http://www.americanchemistry.com

The American Chemistry Council (ACC) represents the leading companies engaged in the business of chemistry. ACC members apply the science of chemistry to make innovative products and services that make people's lives better, healthier and safer. ACC is committed to improved environmental, health and safety performance through Responsible Care®, common sense advocacy designed to address major public policy issues, and health and environmental research and product testing. The business of chemistry is a \$720 billion enterprise and a key element of the nation's economy. It is one of the nation's largest exporters, accounting for ten cents out of every dollar in U.S. exports. Chemistry companies are among the largest investors in research and development. Safety and security have always been primary concerns of ACC members, and they have intensified their efforts, working closely with government agencies to improve security and to defend against any threat to the nation's critical infrastructure.





#### **About BPA**

Plastics made with Bisphenol A (BPA) contribute safety and convenience to our daily lives because of their durability, clarity and shatter-resistant properties. Can liners and food storage containers made with BPA are essential components to helping protect the safety of packaged foods and preserving products from spoilage and contamination. Polycarbonate plastic made with BPA was first used in baby bottles and sippy cups to provide a shatter-resistant product. In recent years, several states have passed legislation restricting BPA in baby bottles and sippy cups, which led to confusion in the marketplace and created an unnecessary distraction for parents, regulators and legislators.

#### ACC's Request for FDA Regulatory Action on Certain BPA-Products

The American Chemistry Council (ACC) has requested that FDA revise certain regulations on the use of BPA for baby bottles and sippy cups to reflect the current state of the market and to eliminate confusion. In the past, these products have been made with BPA, but BPA is no longer used in the United States to make these products.

FDA's action should provide certainty to parents, legislators and state regulators that BPA is not in baby bottles and sippy cups today, and will not be in these products in the future. ACC's request to FDA to change the regulatory status for the use of polycarbonate plastic in baby bottles and sippy cups is not based on any findings or conclusion that these products are unsafe. Instead, this move eliminates the need for state and federal governments to spend further time and effort on a matter that has no practical outcome since BPA is no longer used in these products.

FDA is the national authoritative body on this issue and has the scientific expertise and specific responsibility to make regulatory decisions about BPA in food-contact materials. FDA establishing a clear and consistent regulation in this matter is preferable to a patchwork of state and local regulations.

#### **BPA Safety**

Approved by FDA for safe use in food-contact materials for decades, BPA is one of the most thoroughly tested chemicals in commerce today. The consensus of government agencies across the world is that BPA is safe as used in food-contact materials. The assessments of scientists informing those bodies is that exposure levels to BPA are many times lower—even 1,000 times lower—than government-set safety levels.

The European Food Safety Authority recently examined the science on BPA, including more than 800 studies, and concluded that low doses of BPA are not a risk to human health. In August 2010, Health Canada stated: "the current dietary exposure to BPA through food packaging is not expected to pose a health risk to the general population, including newborns and infants."

