WHO LAUNCH OF THE GUIDANCE DOCUMENT

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Strategic planning for implementation of the health-related articles of the Minamata Convention on Mercury
“HEALTH-RELATED” ARTICLES:

ARTICLES WHERE MoH IS ENVISAGED TO PLAY A LEADING ROLE!

Article 4 and Annex A: Mercury-added products

Phase-out manufacture, import and export by 2020 thermometers, blood-pressure monitors, antiseptics and skin-lightening cosmetics

Dental amalgam – phase-down use
“HEALTH-RELATED” ARTICLES:

ARTICLES WHERE MoH IS ENVISAGED TO PLAY A LEADING ROLE!

Article 7 and Annex C:
ASGM
Development of public health strategies is required

Article 12:
Contaminated sites
Human health risk assessment

Article 16:
Health Aspects
Development & implementation of strategies & programmes to identify & protect populations at risk
ARTICLES WHERE MoH IS ENVISAGED TO PLAY A LEADING ROLE!

Article 17:
Information exchange
Health information

Article 18:
Public information, awareness & education
Human health

Article 19:
Research, development and monitoring
Health assessments and monitoring levels of mercury & mercury compounds in vulnerable populations
NEW WHO GUIDES PUBLISHED SINCE COP2

Strategic planning for implementation of the health-related articles of the Minamata Convention on Mercury

Published 2019

Available here: https://www.who.int/health-topics/chemical-safety
METHODOLOGY ESSENTIALS FOR PLANNING AND PRIORITIZING UNDER THE MINAMATA CONVENTION ON MERCURY

1. Establish a health-sector coordination mechanism
2. Take stock of mercury risk assessment and control programmes already ongoing
3. Gap analysis
4. Determine priorities
5. Strategy development and implementation
6. Monitoring and reporting
Results from country workshops: Sri Lanka and Lao People’s Democratic Republic

Published 2019

Available here: https://www.who.int/health-topics/chemical-safety
NEW WHO GUIDES PUBLISHED SINCE COP2

Addressing health when developing national action plans on artisanal and small-scale gold mining under the Minamata Convention on Mercury

Published 2019

Available here: https://www.who.int/health-topics/chemical-safety
NEW WHO GUIDES PUBLISHED SINCE COP2

WHO mercury website
Available here: https://www.who.int/health-topics/chemical-safety

Mercury in skin lightening products
Published 2019
Available here: https://www.who.int/health-topics/chemical-safety
Strategic planning for implementation of the health-related articles of the Minamata Convention on Mercury

EXPERIENCES FROM SRI LANKA

Dr. L. T. Gamlath,
Deputy Director General, Environment & Occupational Health, Ministry of Health, Nutrition & Indigenous Medicine, Sri Lanka
Sri Lanka became Party to the Convention on June 19, 2017

- Ministry of Mahaweli Development & Environment chairs coordinating committee with Ministry of Health as a member

**Major sources of releases & emissions:**
mercury-added products, medical products, waste incineration, combustion of coal & biomass

- more research needed on mercury content of skin lightening creams & cosmetics
MERCURY AND HEALTH IN SRI LANKA

Populations at risk:

• Workers & general public exposed to industry-related mercury
• Dentists & Ayurvedic practitioners & patients
• Frequent fish consumers
• Users of skin lightening creams
• Jewelers
2014: Government health service started phasing out mercury-added medical products

Measures to achieve phase out will be strengthened & extended to private health services

- Guidance on procurement of mercury-free alternatives & safe management of mercury waste
- Health worker training (ongoing)
- Mercury issues integrated in bachelor curricula & post-graduate community medicine program
MEASURES TO ASSESS AND CONTROL MERCURY RISKS

Ongoing investigation of alternatives to amalgam, & national objectives for dental caries prevention & reduction of amalgam use

Information & awareness-raising programs for occupationally exposed groups & general public
CHALLENGES TO ASSESS AND CONTROL MERCURY RISKS

• Developing infrastructure for mercury waste safe storage, transport, disposal
• Developing capacity for human biomonitoring
• Identifying populations at risk & for detection, treatment, & follow-up of exposed patients
• Health sector needs to raise awareness within and out
• Working with diverse partners
Strategic planning for implementation of the health-related articles of the Minamata Convention on Mercury

Experiences from Lao People’s Democratic Republic

Dr. Panom Phongmany
Deputy Director General, Department of Hygiene and Health Promotion, Ministry of Health, Lao People’s Democratic Republic
Lao PDR became Party to the Convention on September 21, 2017

Ministry of Natural Resources and Environment leads coordination among ministries, including Ministry of Health

Major sources of releases & emissions:
- combustion of coal and biomass
- production of cement & primary metals including copper and gold
- burning & informal dumping of waste
- use and disposal of electrical switches & relays & thermometers

More research needed on skin lightening products, paints with mercury preservatives, light sources, batteries
MERCURY AND HEALTH IN LAO PDR

Populations at risk:

Rural communities dependent on fresh water fish, bivalves, crustaceans, snails, and small crabs as well as paddy rice, especially ASGM communities, other miners, waste handlers & coal handlers
MEASURES TO ASSESS AND CONTROL MERCURY RISKS

• Under preparation: regulations on procurement of mercury-added products used in health sector, such as thermometers and sphygmomanometers. *Draft Public Health Strategy prepared for ASGM: to be reviewed by MoH*

• Updated national health care waste regulations to address wastes containing heavy metals (e.g. mercury)

• Developed SOP and training materials on clean-up of mercury spills

• Dental colleges ceased instruction on use of amalgam

• Regulation on mercury skin lightening products

• Under preparation: Strategic plan for implementation of health-related articles of the Convention. *Elements will be incorporated in 9th Health Sector Development Plan*
CHALLENGES TO ASSESS AND CONTROL MERCURY RISKS

- Developing infrastructure for mercury waste safe storage, transport, disposal
- Identifying populations at risk & for detection, treatment, & follow-up of exposed patients
- Health sector needs awareness-raising and training at all levels
Accelerating implementation of the phase down in use of dental amalgam

Dr. Benoit Varenne
Oral Health Programme
NCD Department
WHO Geneva
WHERE DO WE STAND TODAY?

A highly contrasted situation depending on:

• Ministry of Health commitment
• inter-ministerial collaboration (MoH & MoE)
• national health system & insurance policies scheme
• oral health stakeholders’ position
• civil society awareness
WHERE DO WE STAND TODAY?

89% of participants reported that dental amalgam was used in their countries.
WHERE DO WE STAND TODAY?

Are there mercury-free alternatives that are available in your country?

- Yes: 77.2%
- No: 16.5%
- 6.3%
- I don’t know

If "yes", are these affordable to the most vulnerable and marginalized population groups in your country?

- Yes: 57.4%
- No: 37.7%
- 4.9%
- I don’t know

Half of the respondents reported that mercury-free alternatives were either not available or affordable to the most vulnerable and marginalized population groups in their countries.
WHERE DO WE STAND TODAY?

Involvement with MoH and MoE

Yes, to discuss both, the implementation of the Minamata Convention and the phase down in use of dental amalgam

- MoE: 27.8%
- MoH: 25.3%

Yes, to discuss the implementation of the Minamata Convention

- MoE: 5.1%
- MoH: 3.8%

Yes, to discuss the implementation of the phase down in use of dental amalgam

- MoE: 15.2%
- MoH: 16.5%

No

- MoE: 51.9%
- MoH: 54.4%

MoE  MoH
HOW TO MOVE THIS AGENDA FORWARD?

- No single “one size fits all” solution to the phase down in use of dental amalgam

- Substantial preliminary work is required at global and national levels before moving toward new perspectives (WHO & UNEP)

- National coordination committee under MoH & MoE leadership would be setup to create an environment conducive to consensus-building for health sector

- Consider a timeframe for implementation according to national context

- Short term priority interventions should focus on protecting human health and environment from releases of dental amalgam waste

- Great opportunity to rethink the model of dentistry
THANK YOU