

MCS Report
NICNAS
PO Box 58
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11 March, 2010

Dear Sirs;

COMMENT

For a period in my career I was involved in research, but not medical research; therefore I cannot competently comment on the research suggestions contained in this Report.

I do feel competent enough to comment on chemical sensitivity having spent fifty-five years caring for a spouse who, after decades of medical uncertainty and a disability pension, was finally diagnosed with the MCS/CFS Syndrome in 1996.

While there have been several inquiries into MCS, it is obvious that there is a far broader incidence of chemical sensitivity in the community that is being ignored simply because the mode of action is not understood.

What is evident is that potential adverse health events are known by governments to be triggered by chemical absorption, and that Government Health Departments, State and Federal, have not seen fit to take the protective actions demanded by these governments own legislation. I view this as nothing but negligence, incompetence or gross interference for political expediency.

I agree with the South Australian Social Development Committee's MCS Inquiry conclusion (p48, para5)

"this committee... believes that until clear evidence is presented indicating that chemicals play no role in initiating or triggering symptoms of the [MCS] condition, a cautionary approach in considering the implications of chemical use is required."

My frustrations come in the knowledge that existing legislation clearly encompasses this precautionary approach, but is not being administered by State Governments, nor monitored by Federal Government. I am able only to quote Victoria's legislation as pertinent examples. I am sure other states have similar provisions.

Environment Protection Act 5.41

"A person shall not cause or permit the air to be polluted so that the physical, chemical or biological condition is so changed as to make or be reasonably expected to make the air noxious

or poisonous, harmful or potentially harmful to the health, welfare and safety of human beings..."

Agricultural and veterinary chemicals (control of use) Act 5.1(a)(i)

"The purposes of this act are to impose controls in relation to the use of chemical products... for the purpose of protecting the health of the general public... etal."

Occupational Health and Safety Act 5.22

"Every employer or self employed is required to ensure that persons other than employees are not exposed to risks to their health and safety arising from the conduct of the undertaking of the employer."

Health Act 5.29A

"The function of every Council is to... Promote public health through organized programs including the prevention and control of environmental health dangers, card of health problems of particularly vulnerable population groups."

And sections 40,41

"local government councils are required to remedy all nuisances in the municipality, defined as a state, condition or activity which is, or is liable to be, dangerous to health or noxious annoying or injurious to personal comfort."

A much greater percentage of the population suffers health degradations as a result of chemical exposure without necessarily developing multiple sensitivities. Even so anecdotal evidence suggests that if incidents of exposure are allowed to continue, a person may well develop such an aggregation of trigger substances.

The chemicals most likely to become environmental health dangers, or be reasonably expected to make the air harmful and so expose the public health to risks are those that come in containers labeled by the APVMA as products that must not come into contact with skin or eyes, be ingested or inhaled, whether as spray mists or dusts.

The Federal Agricultural and Veterinary Chemicals Code Act 1994, recognizes that ecologically sustainable development requires a regulatory system designed to ensure that use of chemical products at the present time, will not impair the prospects of future generations.

That APVMA registered products are indeed a risk to human impairment is emphasized by Sect. 89 of the Act, which prohibits any statement or implication that such products are guaranteed or warranted safe by the APVMA. This is further recognized by Chemwatch Material Safety Data Sheets which list the symptoms likely to present, and the first aid instructions, even for 1% aqueous ready-to-use dispersions.

Victoria's State Environment Protection Policy for Air Quality Management (SEPP AQM) incorporates the precautionary principle [7(2)(a)]. The policy also determines that protection of air quality is a responsibility of all levels of government, industry, business, communities and the people [7(5)(b)]; that emissions to the air from all sources including domestic, will be managed so that life, health and well being of humans and neighbourhood, local and regional air quality are protected [8, 9(1)(a) and (b)].

The S.A. SDC 2005 report on MCS, and now the 2010 Draft by NICNAS record similar advice: that the only effective strategy known to prevent adverse sensitivity reactions is to avoid exposure to incitants.

State policy directs that persons who generate pollution and waste (and off-target chemical drifts are both) should bear the cost of containment, avoidance or abatement [7(5)(b)]. Total abatement is unlikely in view of the economic advantages provided by chemical use. Containment of pesticides once committed to free air is currently impossible, leaving only avoidance as the tactic to be universally adopted

BUT THIS SIMPLE PLOY IS NOT BEING APPLIED TO THE PUBLIC'S EXPOSURE TO THE INEVITABLE CHEMICAL DRIFTS OFF-TARGET AND UNLICENCED, UNIFORMED USE IN AND AROUND HOMES, TO THE DETRIMENT OF THE MOST VULNERABLE OF ALL COMMUNITY GROUPS - THE PRESENT AND FUTURE GENERATIONS OF CHILDREN.

For years now I have been trying to get some understanding from government officials as to why this disparity exists between the decrees of legislation promising health protection and the actual ground level actions applied to establish that protection. What I get is farcical... prohibited statements!

"Established safety factors are applied.... Determining a level of exposure that is safe from all known hazards" (Mark Butler MP, 30 Sept 2009)

"Safety factors are applied.... Which limit exposure of the public... protect the health of the most vulnerable members of the community, such as children." (Sandra Gebbie OCSEH, 25 Jan 2009)

"The Government is committed to ensuring that pesticides and herbicides are safe to use." (Ian Coleman OCSEH, 1 May 2009)

Similar parroting responses come from State Ministers and Depts. Rarely, comes some understanding:

"Clearly only regulatory actions that encourage responsible use of chemicals through measures such as ensuring adequate warnings of environmental releases could not be regarded as anything but of value." (Dr Margaret Hartley, Dept of Health and Ageing, 17 Dec 2004).

But in 2010 the general public has yet to see this valuable adjunct.

In Victoria only the Dept. of Primary Industries has made a feeble effort. A review in 2006-7 of the regulations attendant to the Ag.Vet.Chem (control of use) Act identified the most vulnerable groups to chemical degradation as pregnant and nursing mothers, children, the aged or infirm and those with chemical sensitivity. Yet the revised regulation provided that only the Principals of selected institutions should be given prior notice of an application, together with the bare minimum of information.

My research amongst local Principals revealed that none were aware of the regulations and so had no plan of action should they ever get a notification.

The adverse effects of passive tobacco smoke inhalation is known and recognized by governments. As too, those of un-flued gas heaters, solvents, glues, petrochemicals etc. But passive exposure to pesticide, VOC's et al is permitted to continue without education and warnings of the adverse potentials of exposure given to the public.

Yet I continue to read report after report linking pesticides to various diseases.

Rheumatoid arthritis and Lupus (American College of Rheumatology 17/10/09). Childhood Cancer (Georgetown University Medical Centre 28/7/09). Alzheimer's, Parkinson's (Greater Boston Physicians for Social Responsibility 23/9/08). Diabetes (Nat. Institute of Environmental Sciences 4/6/08). Thyroid Malfunction (Environmental Health Perspectives Vol 116, No.6 June 08). Asthma (Journal of Allergy and Clinical Immunology 2008, also American Thoracic Society 28/12/07). Autism (California Dept. of Public Health 30/7/07). Breast Cancer (BioMed Central 13/2/08). Genital Malformations and Fertility problems (BBC TV Program 2008).

The latest finding is that chemically engineered Folic Acid supplements, taken by pregnant women to avoid Spina Bifida in the newborn, should be discontinued within the first ten weeks of gestation to avoid respiratory problems in the child later in its development.

God help us! It is the synthetic supplement that poses the problem, so why is it being added to a wide spectrum of foodstuffs, wanted or not? Why is its continued application being condoned by governments allegedly committed to ensuring safe use of chemicals?

For pities sake! Apply the Precautionary Principle with utmost determination. The legislation asserts that such substances are not necessarily harmless. The APVMA identifies many substances that have toxic potential, and manufacturers list the likely outcomes from absorption via a variety of pathways.

Exposure to these compounds must be avoided by all possible means. Ensure (and I mean make absolutely certain) that all appropriate means of avoidance are put in place, and then argue

over whether MCS has a physiological or psychological mode of action. Whichever, human misery is the result. A protective fence at the top edge of a cliff is a far better option than divided opinion in the ambulance at the base, waiting for new victims.

I have only one comment on this revised draft on MCS. Ref Sect. 3.1.7, the latter part of the last paragraph p.34 and the continuation on p35 is repeated verbatim on p38 paragraph 4. Unnecessary repetition?

This, and other reports, emphasise for me the lack of a controlling, coordinating body collating the actions within the divided areas of responsibility - Industrial, Agricultural, Food and Therapeutics - in relation to existing legislative intent, and the orphan area of chemical use that nobody wants to take care of ... household chemical applications.

My hope is that this diatribe will be forwarded to someone with enough perspicacity and political clout to prosecute the protective intent of current legislation, particularly at state level, otherwise that legislation is nothing but hyperbole; an elaborate con job!

Yours exasperatedly



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