Comments on EFSA Draft Scientific Opinion

Re-evaluation of the risks to public health related to the presence of bisphenol A (BPA) in foodstuffs

22 February 2022

General comments:

CHEM Trust welcomes the re-evaluation of BPA and supports the recommendation for a revised TDI of 0.04 ng/kg bw/day based on new studies on the effects on the immune system. EFSA concludes that with the new TDI and exposure estimates from 2015, there is a health concern from dietary BPA exposure for all age groups. This is really concerning!

Already back in March 2014 CHEM Trust highlighted in our comments to the public consultation of the previous EFSA BPA opinion, that several studies have reported adverse effects on the immune system and that these should be properly considered. The outcome of this new re-evaluation now concludes that there are effects on the immune system and the likelihood level is considered as ‘likely’ and is taken forward for setting a new health-based guidance value.

In other words, EU citizens have been unnecessarily exposed to BPA at risk levels at least since 2015, despite the available evidence and concerns about its hazardous properties and ongoing exposure.

We recognize the scientific work and the immunotoxicity expertise involved in this new assessment of the effects on the immune system, resulting in the significant lowering of the TDI. We also note that the experts conclude that the TDI is so low that is highly probable that it will also be protective against other harmful effects, e.g. on mammy gland development and developmental neurotoxicity.

In CHEM Trust’s view this long history of BPA evaluation really illustrates the pitfalls of the EFSA approach to detailed risk assessment and its limitations to protecting health.

First of all, we are concerned that many data/studies that clearly show adverse effects are not taken forward for setting the toxicological reference point. This is due to EFSA’s very strict criteria for considering the likelihood level for effects and/or the requirements of evidence on the mode of action, causality, and dose-response which sets a high burden for any assessment (even though data/these studies were at least considered in the uncertainty analysis).
Secondly, although, we highly acknowledge and respect the enormous efforts made by experts in trying to set a ‘true’ safe level, it must be emphasised that these assessments will only ever create a ‘current estimate’ of hazard and risk and always be a step behind the ‘reality’ of continuously emerging new knowledge. Thus, these lengthy and very resource-intensive thorough assessments do not provide answers to the ‘true’ risk and the resources spent are disproportionate compared to other regulatory measures to adequately protect human health.

Thirdly, a serious limitation is that the evaluation does not assess at all the risks of exposure to other bisphenols such as BPS, BPF, BPAF etc., several of which are also identified endocrine disrupters and have shown similar adverse effects. It should be assessed whether these similar substances also have effects on the immune system that add to the risk, because daily combined exposure to these substances is common and increasing. In the meantime, this recommended new TDI should apply as temporary TDI to other relevant bisphenols on the market.

In conclusion, there is a need for a more precautionary approach when it comes to risks to public health associated with the presence of BPA and other chemical substances in foodstuffs:

- Substances of Very High Concern like BPA should be banned and phased out from consumer products and from products that come into contact with food.
- Combined exposure to similar substances should always be taken into account as well as exposure to other substances with similar adverse effects, including from other sources, should always be taken into account in risk assessment of substances. Otherwise, the overall risk will be underestimated.
- There is an immediate need for new legislation regulating all chemicals coming into contact with food, including to prevent regulated and banned substances from being replaced by similar but not yet assessed substances.