19. Can you provide evidence of whether the economy, society or the environment would be better or worse off (all factors considered) if the substance is included in the Authorisation List?

CHEM Trust supports the inclusion of Dicyclohexyl phthalate in Annex 14 of UK REACH due to its endocrine disrupting properties for which it was classified as a Substance of Very High Concern in accordance with Article 57(f) in 2018. In addition, CHEM Trust supports the proposal to include DCHP on the authorisation list based on its classification in the GB Mandatory Classification and Labelling (MCL) list as toxic for reproduction, category 1B. REACH registrations identifies that this substance may damage fertility or the unborn child and is toxic to aquatic life with long lasting effects.

CHEM Trust identified it as a key phthalate to take action on in a 2018 research project due to its presence in plastic packaging.

As the HSE background document highlights, without comprehensive or accurate data on the volume and use of this substance in Great Britain, UK REACH should assume the relevance of uses identified in EU registrations.

The ECHA substance profile states that the substance is used by consumers, in articles, by professional workers (widespread uses), in formulation or re-packing, at industrial sites and in manufacturing. The substance is used in the following consumer products: adhesives and sealants, coating products, fillers, putties, plasters, modelling clay, finger paints, non-metal-surface treatment products, inks and toners, polishes and waxes, polymers and textile treatment products and dyes.

Society and the environment would be better off if the substance is included in the Authorisation List. It would reduce exposure to this EDC and reduce its harm on human health and wildlife as well as contribute to reducing long-term society`s health costs. This 2014 Report quantifies some of the costs to society of exposure to EDCs (including phthalates). The report says: “Assuming that EDs constitute 2, 20 or 40% the total costs for the selected health effects are 3.6, 36.1 or 72.3 million Euros/year of exposure in the Nordic countries, this corresponds to 59, 592 and 1,184 million Euros/year at EU-level”. This means the estimated costs for effects on male reproductive health (testicular cancer, hypospadias, cryptorchidism and infertility) are a significant burden for society. Furthermore, the costs related to male reproductive effects represent only a fraction of the total costs of endocrine disruptors, highlighting the importance of minimising exposure to EDs. The report highlights further limited evidence linking these diseases and disorders “with specific occupations and with exposures to chemicals with endocrine disrupting properties, particularly agricultural workers (pesticides and fungicides), PBDE flame retardants and phthalate plasticizers.”