

On behalf of the Endocrine Society, thank you for the opportunity to provide views on the Guiding Questions to inform the second informal meeting of the Heads of Delegation. The Endocrine Society is a global community of physicians and scientists dedicated to advancing the understanding of hormone systems and the care of people with endocrine diseases. Our members' expertise has helped establish the scientific consensus showing that chemicals used in plastics can act as endocrine-disrupting chemicals, or EDCs, and contribute to serious adverse effects on human and environmental health. The aim of our engagement in the Plastics Treaty process is to improve public health through better regulatory approaches to EDCs; we focus our comments on two of the guiding questions relevant to this goal.

1. Plastic products requiring global measures, actions, or cooperation

Decisions on which plastic products require global measures should be guided by their known and potential effects on human and environmental health across the entire plastic lifecycle. Products should be prioritized when they contain chemicals of concern, including EDCs such as bisphenols, phthalates, and PFAS. Decades of peer-reviewed research have linked exposure to EDCs with infertility, diabetes, cancer, altered neurological development, and other adverse health outcomes. These effects can occur at extremely low, environmentally relevant levels and may be particularly consequential during sensitive periods of development such as pregnancy and adolescence.

Hazardous properties should therefore provide a sufficient basis for identifying chemicals and plastic products that require action. Criteria should account for endocrine activity, persistence, bioaccumulation, mobility, toxicity, releases throughout the lifecycle, and the potential for exposure during production, use, recycling, waste management, and disposal.

Global measures should also prioritize plastic products that are associated with disproportionate burdens on children, pregnant women, workers, and affected countries and communities. Appropriate measures should include restrictions, phase-outs, reductions, safer product design, and strict safety standards for chemicals used in plastics. This approach should operate alongside measures to limit plastic production and reduce exposure to chemicals of concern.

The instrument should avoid sectoral exemptions, including exemptions for medical or scientific products. Where a plastic product may serve an important function and alternatives are not yet available, Parties could consider a narrowly defined essential-use approach. Any exemption should be transparent, time-limited, periodically reviewed, and conditioned on the absence of safer and feasible alternatives.

2. Principles and approaches for effective implementation

The treaty provides an opportunity to address the interconnected goals of reducing plastic pollution, minimizing exposure to harmful chemicals, and preventing disease. Protection of human and environmental health should be a central principle of the instrument and should be reflected not only in its objective and preamble, but throughout its substantive obligations, implementation provisions, and effectiveness evaluation.

The instrument should also incorporate principles of prevention, protection of vulnerable populations, equity, transparency, and freedom from conflicts of interest. Particular attention should be given to countries and communities experiencing disproportionate exposure or lacking sufficient capacity to

monitor and address the health effects of plastic pollution. Biomonitoring approaches should be pursued to evaluate body burdens, identify disparities, and assess whether implementation is reducing exposure.

Finally, implementation and effectiveness evaluation must be informed by the best available independent science. The instrument should establish a transparent scientific body that includes researchers with relevant expertise, including academic scientists who are actively engaged in endocrine research and free from conflicts of interest. This body should advise Parties on chemicals and products requiring action, exposure-reduction measures, emerging scientific evidence, and indicators for evaluating the treaty's effectiveness. This structure would allow the instrument to remain responsive to evolving scientific evidence while maintaining strong and durable protection for human and environmental health.

In conclusion, the Endocrine Society and our global community of scientists and clinicians stand ready to contribute relevant expertise in support of an effective, scientifically grounded instrument that reduces plastic pollution, prevents harmful exposures, and protects health throughout the plastic lifecycle.